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CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P95000002237 (2) DOCUMENT #

G.B.'S AUTO SERVICE OF SW FL. INC.

Principal Place of Business Mailing Address 1569 BRANTLEY ROAD 1569 BRANTLEY ROAD FORT MYERS FL 33907 FORT MYERS FL 33907 3. Date Incorporated or Qualified 01/10/1995 3a. Date of Last Report Applied For 2a. Mairing Address 2. Principal Place of Business Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No

10. Name and Address of New Registered Agent Country Zic Ζıρ 30 24 25 29 9. Name and Address of Current Registered Agent 81 Name BRANTLEY, GEORGE B JR. 82 Street Address (P.O. Box Number is Not Acceptable) 1569 BRANTLEY ROAD FORT MYERS FL 33907 83 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes. The above named corporation submits this statement for the purpose of changing its registered office or registered agent of both, in the State of Flouda. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lan familiar with, and agreet the obligations of Section 607.0505, Florida Statutes. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICE HE AND DIRECTORS 13. 12. Change DELETE 1.11Hit TITLE BRANTLEY, GEORGE B JR. 1.2 NAME NAME 13751 FERN TRAIL DRIVE 1.3 STREET ADDRESS STREET ADDRESS NORTH FORT MYERS FL 33903 1.4 CHY <u>\$1.70</u> CITY: \$1:2IP Change Addition DELETE 2 1 Title TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 24 CITY - ST - ZIP CITY-ST-ZIP ☐☐ Change ■ Addition DELETE 3 1 THT: E TIFLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY ST-ZIF CITY ST ZIP DELETE 4 1 TITLE ☐ Change Addition TITLE 4.2 NAME STREET ADDRESS 4.3 STREET AUDRESS 4.4 CITY - \$1 ZIP CITY-ST-ZIP Add t on DELETÉ ☐ Change 5 1 Tif. £ 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIF Change Addition DELETE 6 1 TiTLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or directory of the corporation or the required or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Block

NAME OF SIGNING OFFICER OR DIRECTOR

or or an attachment with an address.

941-934 2526

CR2E034 (12/95)