## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Mar 03 1997 8:00am

Secretary of State

(96/6)

Secretary of State **DIVISION OF CORPORATIONS** 

1997

POCUMENT # P95000038436 (8)

FOUR TOWNES AUTO PARTS. INC.

Principal Place of Business Mailing Address 2301 S. VOLUSIA AVENUE 2301 S. VOLUSIA AVENUE ORANGE CITY FL 32763 **ORANGE CITY FL 32763-7615** 3. Date Incorporated or Qualified 3a. Date of Last Report 05/15/1995 04/03/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-3322330 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζıρ Country Zip Country This corporation has liability for intengible tax under s. 199.032. 24 Yes No 25 30 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BIGGAR, ANDREW J JR. 2301 S. VOLUSIA AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **ORANGE CITY FL 32763** 83 **B4** City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or printed name of nigestered agent and title if applicable (NOTE: Registered Agent signature required when re-instating) 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE Total PD 1.1 TITLE ☐ Change Addition BIGGAR, ANDREW J. NAME 1.2 NAME 2301 S. VOLUSIA AVENUE STREET ADDRESS 1.3 STREET ADDRESS **ORANGE CITY FL** CITY - ST - Z(F 1 4 City-St-ZiP DELETE HTLE STD 2.1 TITLE Change \_\_\_ Addition BIGGAR, DONNA L NAME 2.2 NAME 2301 S. VOLUSIA AVENUE STREET ADDRESS 2.3 STREET ADDRESS **ORANGE CITY FL 32763** CITY-SI-ZIP 2. 4 CITY - ST- ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4. CITY - ST- ZIP ■ DELETE THLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change THILE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-7IP 5.4 CITY-ST-ZIP DELETE TITLE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS

SIGNATURE:

appears in Block 12 or Block

CITY - ST - ZIP

10 L. BIGGAR 2/25/97 904.775-2600

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 efficer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name