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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000066993 (3)

Principal Place of Business	Mailing Address
2910 LAKE ALFRED ROAD	2910 LAKE ALFRED ROAD
WINTER HAVEN FL 33881	WINTER HAVEN FL 33881

## **FILED** Apr 21 1998 8:00am Secretary of State

	AUTO SALES OF POLK Co	OUNTY, INC.  Mailing Address		
	LFRED ROAD	2910 LAKE ALFRED ROA WINTER HAVEN FL 3388		
WINTER HAVEN FL 33881 WINTER HAVEN FL 33881		•	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified
				08/30/1995
2. Principal Place of Business 2s. Mailing Address			4, FEI Number Applied For	
26     Suite, Apt. #, etc.   Suite, Apt. #, etc.			59-3329778   Not Applicable   \$8.75 Additional	
22] 27			5. Certificate of Status Desired Fee Required	
City & Sta	le	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zιp	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. 🔲 Yes 🔀 No
	g. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered Agent
	irton, david l		81 Name	
2910 LAKE ALFRED ROAD			82 Street	Address (P.O. Box Number is Not Acceptable)
WINTER HAVEN FL 33881			83	
			83	
			84 City	85 Zip Code
	40-10-10-10-10-10-10-10-10-10-10-10-10-10			FL   2000
office or	registered agent, or both, in the Stat	te of Florida. Such change was	es, the above-harned authorized by the cor	I corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a	am familiar with, and accept the obli	gations of, Section 607.0505, Fi	orida Statutes.	
SIGNATURE			<del></del>	
12.	Signature, typed or printed name of registered a	Den) and bitn if applicable (NO ND DIRECTORS	E Registered Agent aignature  13.	e required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	BURTON, DAVID L		1.2 NAME	
STREET ADDRESS	2910 LAKE ALFRED ROAD		1.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN FL 33881		1.4 CITY - ST - ZIP	
TITLE	D	☐ DELETE	21 TITLE	Change Addition
NAME	BURTON, DAVID W		2.2 NAME	
STREET ADDRESS	2910 LAKE ALFRED ROAD		2.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN FL 33881		2. 4 CITY - ST - ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME	1		3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	1		4. 2 NAME	
STREET ADDRESS	1		4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change L Addition
NAME	Ì		5.2 NAME	
STREET ADORESS			5.3 STREET ADDRESS	
CITY-ST-ZIP	7-11	T Neitze	5.4 CITY-ST-ZIP	
TALE	[	☐ DELETE	6.1 TITLE	Change Addition
NAME			62 NAME	
STREET ADDRESS	1		6.3 STREET ADDRESS	
CITY-ST-ZIP	l		6.4 CITY - ST - ZIP	l

14. I 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 officer 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lend 2 Lucie

Pavid L Burton

(941) 295-9914