Feb 20, 1999 8:00 am

Secretary of State

02-20-1999 90089 033 ***158.75

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #- P95000067857

LATHEM AUTO SALES, INCORPORATED

Division Bloom		Mailing Address					
Principal Place		Mailing Address					
3520 N. COCOA BLVD							
COCOA FL 325	920	0000A FL 32920		DO NOT WRITE IN	THIS SPACE		
				3. Date Incorporated or Qualifed			
	Cutile a final			08/29/1995			
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	<u> </u>	lied For	
21	A A COLOR	26		59-3333457	····	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Ad Fee Req		
City & Stat	ee	City & State		6. Election Campaign Financing	\$5.00 N	May Be	
23		28		Trust Fund Contribution	Added to		٠
Zip	Country Zip		Country 8. This corporation owes the current year Intangible Personal Property Tax.			□No	
24	9. Name and Address of Curre		<u> </u>	10. Name and Address of New Registe		==	
	J. Name and Address of Carry		81 Name	<u> </u>			
LATI	HEM, STEVEN D		20 01 14	(DO D. N. berie Net Assessable)			
3520 N. COCOA BLVD			82 Street Ad	dress (P.O. Box Number is Not Acceptable)		1	
COC	COA FL 32926		83				
			24 00		85 Zip C	-do	
			84 City		FL 85 Zip Ci	uue	
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the oblig	e of Florida. Such change was autก	ionzed by the corpora	rporation submits this statement for the purpo- tion's board of directors. I hereby accept the a	se of changing its r appointment as reg	egistered istered	
SIGNATURE					_		
	Signature, typed or printed name of registered at		egistered Agent signature requ			25 IN 12	Ó
12.		ND DIRECTORS ☐ DELETE	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	Addition	7
TITLE	P	DECE IE	1.1 TITLE		Gridinge		
NAME	LATHEM, DOUGLAS W	i.	1.2 NAME 1.3 STREET ADDRESS			-	Š
STREET ADDRESS							Š
CITY-ST-ZIP	COCOA FL 32926		1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change	Addition	Ç
TITLE			2.2 NAME		<u> </u>	_	
NAME	LATHEM, LINDA S 2580 N. COX ROAD		2.3 STREET ADDRESS				
STREET ADDRESS	COCOA FL 32926		2.3 STREET ALADRESS				
CITY-ST-ZIP	VP		2 4 CITY ST 7IB				
NAME		□ DELETE	2.4 CITY-ST-ZIP		Change	Addition	
	**	☐ DELETE	3.1 TITLE		Change	[_] Addition	
CEDEET VUIDEGG	LATHEM, STEVEN D	☐ DELETE	3.1 TITLE 3.2 NAME		Change	Addition	
STREET ADDRESS	LATHEM, STEVEN D 4460 SENECA ST	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		Change	☐ Addition	
STREET ADDRESS CITY+ST-ZIP TITLE	LATHEM, STEVEN D	☐ DELETE	3.1 TITLE 3.2 NAME		☐ Change	Addition	
CITY+ST-ZIP	LATHEM, STEVEN D 4460 SENECA ST		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP				
CITY-ST-ZIP TITLE	LATHEM, STEVEN D 4460 SENECA ST COCOA FL 32926		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE				
CITY-ST-ZIP TITLE NAME STREET ADDRESS	LATHEM, STEVEN D 4460 SENECA ST COCOA FL 32926		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME	· · · · · · · · · · · · · · · · · · ·			
CITY-ST-ZIP TITLE	LATHEM, STEVEN D 4460 SENECA ST COCOA FL 32926		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS				

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 of the receiver or trustee sinpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, by one attachment with any address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1.TITLE_ 6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME