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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

SIGNATURE:

| DOCUMENT # P95000089936 (5) 1. Corporation Name CHUCKS AUTO OF DELAND, INC. | | | | | |
|--|---|--|---|--|--|
| Principal Place of Business 204 SOUTH WOODLAND BLVD. DELAND FL 32720 | | Mailing Address 204 SOUTH WOODLAND BLVD. DELAND FL 32720 | | 1 194(194) HG (9/6) SUM GBIII DIIII BBM 1940 1940 1940 1940 | |
| | | | | 3. Date Incorporated or Qualified 11/27/1995 | 3a. Date of Last Report |
| Principa! Plac | e of Business | 2a. Mailing Address | | 4. FELNumber 5933602. | Applied For Not Applicable |
| Suite, Apt. #, | etc. 0) AU | Suite, Aprt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | etc. A pour | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| | <u>/</u> | 28 | Country | Trust Fund Contribution 8. This corporation has liability for | Added to Fees |
| Zip | Country 25 | Ζφ 29 | 30 | Florida Statutes 🔽 Yes | □ No |
| | 9. Name and Address of Curren | t Registered Agent | 81 Name | 10. Name and Address of New F | legistered Agent |
| CORPO | RATION SERVICE COMPANY | | 1 1 " | ress (P.O. Box Number is Not Acceptat | ole) |
| 1201 H | AYS STREET | | | | |
| TALLAH | IASSEE FL 32301-2525 | | 83 | | |
| | | | 84 Gity | | FL 85 Zip Code |
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| 2. | | id derectors | 11. For justicers I Agent's graph to remain | et when recipation ADDITIONS/CHANGES TO OFF | DATE ICERS AND DIRECTORS IN 12 Change Addition |
| Z. | | | | ADDITIONS CHANGES TO OFF | ICERS AND DIRECTORS IN 12 |
| Z. TLE AME TREET ADDRESS | OFFICERS AN D MILLIGAN, CHARLES A 204 SOUTH WOODLAND B | ID DPRECTORS | 13. 1 1 THE 12 NAME 13 SHREET ADDRESS | ADDITIONS CHANGES TO OFF | ICERS AND DIRECTORS IN 12 |
| 2. TLE AME TREE1 ADDRESS ITY-ST-ZIP | OFFICERS AN D MILLIGAN, CHARLES A | ID DPRECTORS | 13. 1 1 TILE 12 NAME | ADDITIONS CHANGES TO OFF | ICERS AND DIRECTORS IN 12 |
| Z. TLE SIME REET ADDRESS TY-ST-ZIP TLE | OFFICERS AN D MILLIGAN, CHARLES A 204 SOUTH WOODLAND B | ID DIRECTORS DELETE | 13. 1 1 THE 1 2 NAME 1 3 SHEET ADDRESS 1 4 CITY - ST - ZIP 2 1 HITLE 22 NAME | ADDITIONS CHANGES TO OFF | ICERS AND DIRECTORS IN 12 |
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SIGNATURE AND TYPEN OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR