

DOCUMENT # P96000024600

1. Entity Name

B & F AUTO DISMANTLERS, INC. OF PALMETTO

9 0 6 2 0 2



Principal Place of Business	Mailing Address
POST OFFICE BOX 1028	POST OFFICE BOX 1028
PALMETTO FL 34220	PALMETTO FL 34220

<b>4. FEI Number</b> <b>65-0658901</b>	<table border="1"> <tr> <td data-bbox="1325 592 1385 596">Applied For</td> </tr> <tr> <td data-bbox="1325 596 1385 602">Not Applicable</td> </tr> </table>	Applied For	Not Applicable
Applied For			
Not Applicable			
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P <b>BURCH, BAXTER A.</b> <b>5112 US HIGHWAY 41 NORTH</b> <b>PALMETTO FL</b> <div><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
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**SIGNATURE:** [Signature] 11/17/01 941/722-6279  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)