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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1998 DOCUMENT # P96000064205 (3) FLAMINGO USED AUTO SALES, INC.

**FILED** Feb 12 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 6559 OLD PALA FOX HWY 7065 MOBILE HIGHWAY PENSACOLA FL 32505 PENSACOLA FL 32526 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/29/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 59-3391265 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional m 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country This corporation owes or has paid the current year intangible 24 25 30 Personal Property Tax due June 30. Yes Yes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PALMER, RAYMOND B Name 400 GULF BREEZE PARKWAY, SUITE 202 82 Street Address (P.O. Box Number is Not Acceptable) GULF BREEZE FL 32561 83 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 (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change RODDY, ALAN G 1.2 NAME NAME 7065 MOBILE HIGHWAY STREET ADDRESS 1.3 STREET ADDRESS PENSACOLA FL 32526 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 2.1 TITLE MATTSON, THERESA M NAME 2.2 NAME 7065 MOBILE HIGHWAY STREET ADDRESS 2.3 STREET ADDRESS PENSACOLA FL 32526 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3 1 TITLE AKE, MERLIN 3.2 NAME 7020 WEATHER WOOD DR. STREET ADDRESS 3.3 STREET ADORESS PENSACOLA FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 41 TITLE Change Addition 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change ☐ Addition TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP

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 attending the with an address.

SIGNATURE:

SIGNATURE:

9808/418-0700