

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

FILED
Apr 09, 1999 8:00 am
Secretary of State

04-09-1999 90013 037 ***150.00

DOCUMENT # P96000064916

1. Corporation Name
HILL'S AUTO WORLD INC.

Principal Place of Business
508 SOUTH OAK AVENUE
BOWLING GREEN FL 33834

Mailing Address
508 SOUTH OAK AVENUE
BOWLING GREEN FL 33834

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/02/1996

4. FEI Number

65-0692293

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HILL, JAMES DAVID
16 GRADY REVELL ROAD
WAUCHULA FL 33873

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DPT ☐ DELETE
NAME HILL, JAMES DAVID
STREET ADDRESS 16 GRADY REVELL ROAD
CITY-ST-ZIP WAUCHULA FL 33873

1.1 TITLE DVS ☒ Change ☐ Addition
1.2 NAME Hill, James David
1.3 STREET ADDRESS 16 Grady Revell Road
1.4 CITY-ST-ZIP Wauchula FL 33873

TITLE DVS ☐ DELETE
NAME HILL, DANIEL LEE
STREET ADDRESS 16 GRADY REVELL ROAD
CITY-ST-ZIP WAUCHULA FL 33873

2.1 TITLE DPT ☒ Change ☐ Addition
2.2 NAME Hill, Daniel Lee
2.3 STREET ADDRESS 16 Grady Revell Road
2.4 CITY-ST-ZIP Wauchula FL 33873

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
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 attachment with an address, with all other like empowered.

SIGNATURE:

Daniel L Hill DANIEL L Hill 4-7-99 (941) 375-4444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0435561