

FILED

May 13 1997 8:00am
Secretary of State

FILE NQW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P-96000067656
LOCKHART AUTO SERVICE INC
7330 EDGEWATER DR
ORLANDO FL 32810

FED ID # 59-3412564

7330 EDGEWATER DR
ORLANDO FL 32810

SAME AS
ABOVE

3. Date Incorporated or Qualified 96	3a. Date of Last Report 96
4. FEI Number 59-3412564	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 has liability for intangible tax under s. 199.032 Florida Statutes ☒ Yes ☐ No	
10. Name and Address of New Registered Agent	

81. WILLIAM UCAS
8200 ROSE AVE
83.
84. City ORLANDO FL 85. 32810

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]

Signature of registered agent and, if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. TITLE D	☐ DELETE	11. TITLE PRES.	☐ Change ☒ Addition
12. NAME		12. NAME WILLIAM UCAS	
13. STREET ADDRESS		13. STREET ADDRESS 8200 ROSE AVE	
14. CITY-STATE-ZIP		14. CITY-STATE-ZIP ORLANDO FL 32810	
21. TITLE	☐ DELETE	21. TITLE	☐ Change ☐ Addition
22. NAME		22. NAME	
23. STREET ADDRESS		23. STREET ADDRESS	
24. CITY-STATE-ZIP		24. CITY-STATE-ZIP	
31. TITLE	☐ DELETE	31. TITLE	☐ Change ☐ Addition
32. NAME		32. NAME	
33. STREET ADDRESS		33. STREET ADDRESS	
34. CITY-STATE-ZIP		34. CITY-STATE-ZIP	
41. TITLE	☐ DELETE	41. TITLE	☐ Change ☐ Addition
42. NAME		42. NAME	
43. STREET ADDRESS		43. STREET ADDRESS	
44. CITY-STATE-ZIP		44. CITY-STATE-ZIP	
51. TITLE	☐ DELETE	51. TITLE	☐ Change ☐ Addition
52. NAME		52. NAME	
53. STREET ADDRESS		53. STREET ADDRESS	
54. CITY-STATE-ZIP		54. CITY-STATE-ZIP	
61. TITLE	☐ DELETE	61. TITLE	☐ Change ☐ Addition
62. NAME		62. NAME	
63. STREET ADDRESS		63. STREET ADDRESS	
64. CITY-STATE-ZIP		64. CITY-STATE-ZIP	

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14. I, the undersigned, certify that the foregoing information is true and correct, and that the signature shall have the same legal effect as if made under oath, that the undersigned is a duly authorized officer or director of the corporation, and that the undersigned is not a minor, an incompetent, or a person who has been adjudicated as mentally incompetent.

SIGNATURE:

[Signature]

CR2E034 (9/96)