

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

FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998



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

May 19 1998 8:00a
Secretary of State

DOCUMENT #
1. Corporation Name

Chuck's Used Auto Parts, Inc.
3650 Woodville Hwy.
Tallahassee, FL 32311-7204
904-877-2027

Principal Place of Business

Mailing Address

Same as above

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2e. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

28. Country

24. Zip

25. Country

29. Zip

30. Country

3. Date Incorporated or Qualified

4. FEI Number

5. Certificate of Status Desired

6. Election Campaign Financing Trust Fund Contribution

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

Applied For

59-3422651

Not Applicable

8.75 Additional Fee Required

55.00 May Be Added to Fees

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

85. Zip Code

Charles R. Hollifield
826 Essex Dr.
TALL, FL 32304

FL

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 and agree to the obligations imposed by Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent (required when reappointing)

Charles R. Hollifield

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Charles R. Hollifield
826 Essex Dr.
TALL, FL 32304

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-05/21/98--01006--009
***150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 appointment with an address.

SIGNATURE

Signature and typed or printed name of signing officer or director

Charles R. Hollifield

4/20/97 850-878-6525

CR2E034 (10/97)