

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

FILED
May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **Pa70000014574**
1. Corporation Name: **TAMPA FLEET PAINT & BODY, INC**

Principal Place of Business Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21. 3016 51st So.		26. WALTER SANDERS		February 11, 1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. Fed. Number	
				59-3432333	
22. City & State		27. 13910 N DALE MARRY #1		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23. TAMPA FL		City & State		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip		Zip		Country	
33619		33618		US	
25. US		29. 33618		30. US	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81. Name	SANDERS, WALTER
82. Street Address (P.O. Box Number is Not Acceptable)	13910 N DALE MARRY SUITE 1
83.	
84. City	TAMPA
85. Zip Code	FL 33618

11. Pursuant to the provisions of Sections 607.0902 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 **Walter Sanders**

WALTER SANDERS 3-12-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☐ Change ☒ Addition
NAME		1.2 NAME	P JIMMY TICHENOR
STREET ADDRESS		1.3 STREET ADDRESS	507 BRENTWOOD PLACE
CITY - ST - ZIP		1.4 CITY - ST - ZIP	BRANDON, FL 33511
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	Deborah D. Tichenor
STREET ADDRESS		2.3 STREET ADDRESS	507 Brentwood Place
CITY - ST - ZIP		2.4 CITY - ST - ZIP	Brandon, FL 33511
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 registered 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.

SIGNATURE:

Deborah D. Tichenor
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/98

813-248-1074

CR2E034 (10/97)