

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
May 01, 1999 8:00 am
Secretary of State

05-01-1999 90016 009 ***150.00

DOCUMENT # P97000069651

1. Corporation Name
BAY AREA AUTOMOTIVE GROUP, INC.

Principal Place of Business
21242 S.R. 54
LUTZ FL 33549
US

Mailing Address
6602 HONEY BEAR COURT
TAMPA FL 33625
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 7411 LAND O LAKES BLVD
Suite, Apt. #, etc.
22
City & State
23 LAND O LAKES, FL
Zip Country
24 34639 25 US
2a. Mailing Address
26 10624 GRETN A GREEN DR
Suite, Apt. #, etc.
27
City & State
28 TAMPA, FL
Zip Country
29 33626 30 US

3. Date Incorporated or Qualified

08/11/1997

4. FEI Number
59-3462526

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

9. Name and Address of Current Registered Agent

STANTON, JILLIAN
6602 HONEY BEAR CT.
TAMPA FL 33625

10. Name and Address of New Registered Agent

81 Name STANTON, WILLIAM
82 Street Address (P.O. Box Number is Not Acceptable)
10624 GRETN A GREEN DR
83
84 City TAMPA FL 85 Zip Code 33626

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 WILLIAM STANTON, PRESIDENT DATE 4-27-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT ☐ DELETE
NAME STANTON, WILLIAM
STREET ADDRESS 6602 HONEY BEAR COURT
CITY-ST-ZIP TAMPA FL 33625

TITLE VS ☐ DELETE
NAME STANTON, ROBIN
STREET ADDRESS 6602 HONEY BEAR COURT
CITY-ST-ZIP TAMPA FL 33625

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 10624 GRETN A GREEN DR
1.4 CITY-ST-ZIP TAMPA, FL 33626

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 10624 GRETN A GREEN DR
2.4 CITY-ST-ZIP TAMPA, FL 33626

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

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

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 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: WILLIAM STANTON DATE 4-27-99 813-926-0042

CR2E034 (11/98)