

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

DOCUMENT # P97000079173

1. Corporation Name
INDEPENDENT AUTO DEALER CLEARING HOUSE, INC. ✓

Principal Place of Business

5381 SPRINGWOOD BLVD
PINELLAS PARK FL 33782
US

Mailing Address

5381 SPRINGWOOD BLVD
PINELLAS PARK FL 33782
US

05-00-1999 90182005***43.75
P97000079173

SUNDAY 20 PM 4:19

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

04-26-99 01140 020 \$106.25

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/11/1997

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

21 Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

~~PERRY, CHARLES~~
~~1100 CLEVELAND STREET~~
~~CLEARWATER FL 33765~~

10. Name and Address of New Registered Agent

81 Name HAL CASEY
82 Street Address (P.O. Box Number is Not Acceptable)
83 5381 Springwood Blvd
84 City Pinellas Park FL 85 Zip Code 33782

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, to 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]

(NOTE: Registered Agent signature required when consolidating)

4/23/99

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE D
NAME CASEY, HAL
STREET ADDRESS 5381 SPRINGWOOD BLVD
CITY-ST-ZIP PINELLAS PARK FL 33782-5904

☐ DELETE

TITLE D
NAME CASEY, DOROTHY A
STREET ADDRESS 5381 SPRINGWOOD BLVD
CITY-ST-ZIP PINELLAS PARK FL 33782-5904

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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: X

[Signature]
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/99
Date
Daytime Phone #

CR2E034 (11/98)