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

**PROFIT CORPORATION** ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P97000083162

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## May 07, 1999 8:00 am Secretary of State

05-07-1999 90151 020 \*\*\*150.00

SUPER S	star tire stores of NAI	PLES, INC.								
Principal Place	e of Business	Mailing Address		_	1 18811981	POW 140121 14411 44111 1	IIII MAEII AAIAI IAIA I	/101 (1870 8	istr <b>a</b> si <b>a</b> t raat	
905 E MARTIN LUTHER KING JR DR SUITE 270 TARPON SPRINGS FL 34689 905 E MARTIN LUTHER KING SUITE 270 TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689						DO NOT WRITE IN THIS SPACE				
					· .	orated or Qualifed			į	
		· ,			09/23/199 4. FEI Number	97				
2. Principal Pl	lace of Business	2a. Mailing Address	a. Mailing Address					<u> </u>	olied For	
21		26			59-34789	50			Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of	5. Certificate of Status Desired   \$8.75 Additional Fee Required				
City & State	e	City & State				npaign Financing		5.00 N		
23		Zip Country			Trust Fund C			Added to	Fees	
Zip	Country	Zip		etry		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No				
24	25		30			opeπy ι ax. Address of New F				
<del></del>	9. Name and Address of Current	Registered Agent		81 Name /	10. Name and 7	CD a	registered Agen			
EVANS, H. MICHAEL				<i>K</i>	Lussell	F. BUR	R			
2123 NE COACHMAN ROAD				82 Street A	ddress (P.O. Box Num	ber is Not Accept	able has # 2	270	2	
SUITE A				83	3 6771.61	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	z u c ····			
CLEARWATER FL 34625				•						
				84 City	ARRON Spl	LiN55	FL 85	134	687	
11. Pursuant office or re	to the provisions of Sections 607.0502 egistered/agent, or both, in the State m familiar with, and accept in poblicit	2 and 607.1508, Florida Statute of Florida. Such change was au	es, the ab	ove-named o by the corpor	orporation submits this ration's board of directo	statentent for the ors. I hereby acce	purpose of chang pt the appointmen	ging its r nt as reg	egistered istered	
agent. I ai SIGNATURE	Kung 5	ur					4/27/	99	<u> </u>	
	Signature, typed or printed name of registered agent	· · · · · · · · · · · · · · · · · · ·	Registered /	Agent signature rec	quired when reinstating)	CHANGES TO OF	FICERS AND DI	RECTOR	RS IN 12	
TITLE	OFFICERS ANI	□ OELETE	1.1 TIT	F T	ADDITIONOR	311/41020 10 01		Change	Addition	
	DVP/>/T BURR, RUSSELL F		1.2 NA							
NAME	AND THE PERSON AND THE PERSON AND AND AND AND AND AND AND AND AND AN			REET ADDRESS						
STREET ADDRESS	TARPON SPRINGS FL 34689			Y-ST-ZIP						
CITY-ST-ZIP TITLE	TANFON SENINGS IE 34009	DELETE DELETE	2.1 TIT		···			Change	Addition	
NAME	WILLIAM S. EVANS		2.2 NA	1						
STREET ADDRESS	WILLIAM I EVANS D/P DELETE 100 6000 Cetterd, N.			REET ADDRESS					1	
CITY-ST-ZIP	NAPLES FL =	34106	•	Y-ST-ZIP						
TITLE	1	☐ DELETE	3.1 TIT					Change	☐ Addition	
NAME			3.2 NA	WE						
STREET ADDRESS			3.3 STF	REET ADDRESS						
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP						
TITLE		☐ DELETE	4.1 TITI	E				Change	Addition	
NAME			4. 2 NA	ME						
STREET ADDRESS			4.3 STF	REET ADDRESS						
CITY-ST-ZIP			4.4 CfT	Y-ST-ZIP						
TITLE	☐ DELETE		5.1 TIT	LE T				Change	☐ Addition	
NAME			5.2 NA							
STREET ADDRESS			5.3 STF	REET ADDRESS						
CITY-ST-ZIP			_	Y-ST-ZIP						
TITLE		☐ DELETE	6.1 TITT					Change	☐ Addition	
NAME			6.2 NA							
STREET ANDRESS	1		6.3 STF	REET ADDRESS					1	

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 be 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.

6.4 CITY-ST-ZIP

**SIGNATURE:**