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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARÎMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000102349 (2)

KENNETH WEBB AUTOMOTIVE, INC.

FILED
Jun 22 1998 8:00am
Secretary of State



| Tritopart isse of business Maring Actiless |   |                           |                                       |                              |                 |                                       |  |
|--|---|---------------------------|---------------------------------------|------------------------------|-----------------|---------------------------------------|--|
| 2  | BB'S AUTO REPAIR<br>453 Gannon Circle<br>nama City FL 32405                       | ,                         | WEBB'S A<br>2453 Ga                   | innon C                      | ircl            | B                                     | DO NOT WRITE IN THIS SPACE.  |
|  | name ony i E 02405  |                           | Panama C                              | ANY FL (                     | 324             | 105                                   | 3. Date Incorporated or Qualified 12/02/1997   |
| 2. Principal F                             | Place of Business   | 2a. M                     | ailing Address                        |                              |                 |                                       | 4. FEI Number Applied For  |
| 21 26                                      |   |                           |                                       |                              |                 |                                       | 59-34870/9 Not Applicable  |
| Suite, Apt. #, etc.                        |   |                           | Suite, Apt. #, etc.                   |                              |                 |                                       | SR 75 Additional   |
| 22   |   |                           |                                       |                              |                 |                                       | 5. Certificate of Status Desired Fee Regulard  |
| City & Stat                                | 0   | Ci                        | ty & Stato                            |                              |                 |                                       | 6. Election Campaign Financing \$5.00 May Be   |
| 23   |   | [28]                      |                                       |                              |                 |                                       | Trust Fund Contribution Added to Fees  |
| Zip  | Country   | 70                        | )                                     | Cou                          | intry           |                                       | 8. This corporation owes or has paid the current year Intangible   |
| 24   | 25  | 29                        |                                       | 30                           |                 |                                       | Personal Property Tax due June 30.  Yes No   |
|  | 9. Name and Address of Currer   | nt Registere              | ed Agent                              |                              |                 |                                       | 10. Name and Address of New Registered Agent   |
| WI   | ebb, kenneth l  |                           |                                       |                              | 81              | Name                                  |  |
|  |   |                           |                                       |                              | 82              | Street Ad                             | ddress (P.O. Box Number is Not Acceptable)   |
| •  | 24E2 Common Oi  | }                         |                                       |                              |                 | Oll doc 1 to                          | addies ( 16. San Harrison is Hot / Goophable)  |
|  | 2453 Gannon Circle<br>Pahama City FL 32405  |                           |                                       |                              | 83              |                                       |  |
|  | • WHEN THE SZ405  |                           | 1                                     |                              | 84              | City                                  | B5 Zip Code  |
| 44 Diversant                               | to the provisions of Sections 607 066   | 12 and 607 1              | EOS Elorido Ctot                      | utos the el                  |                 | - named on                            | FL V 2500  |
| office or r<br>agent. I a                  | registered agent, or both, in the State<br>im familiar with, and accept the oblig | of Florida. anions of, Sc | Such change was<br>ection 607.0505, I | s authorized<br>Florida Stat | d by<br>utes    | the corpor                            | orporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered |
| SIGNATURE                                  | Signature, typied or poeted caree of registered age                               | ent and frient ap         | phosphe (No                           | DTE Registered               | l Âge           | nt signature rec                      | equied where reinstating) [DAT]  |
| 12.  | OFFICERS AN   | OTO BILCTO                |                                       | 13.                          |                 |                                       | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |
| TITLE                                      | President - Du  | WER.                      | DELETE                                | 1.1 10                       | LE              | · · · · · · · · · · · · · · · · · · · | Change Addition  |
| NAME                                       | KENNETH L WELL  | Λ                         |                                       | 1.2 NA                       | ME              |                                       |  |
| STREET ADDRESS                             | 1231 MILEN AVE  |                           |                                       | 1.3 \$1                      | REET            | ADDRESS                               |  |
| CITY-ST-ZIP                                | PANAMA City, FL   | 3240                      | l.                                    | 1,4 CI                       | 1 <b>Y</b> - S1 | I - ZIP                               |  |
| TITLE                                      |   |                           | DELETE                                | 2.1 717                      | _               |                                       | ☐ Change ☐ Addition  |
| NAME                                       |   |                           |                                       | 2.2 NA                       | MÉ              | 1                                     |  |
| STREET ADDRESS                             |   |                           |                                       | 12 6 5                       | REET            | ADDRESS                               |  |
| CITY-ST-ZIP                                |   |                           |                                       | 2 4 CI                       | TY-S            | 1-7IP                                 | ••   |
| TITLE                                      |   |                           | DELETE                                | 3 1 111                      | l E             |                                       | Change Addition  |
| NAME                                       |   |                           |                                       | 3 2 NA                       | ME.             | ŀ                                     |  |
| STREET ADDRESS                             |   |                           |                                       | 3 3 ST                       | HEET            | ADDRESS                               | ,  |
| CITY-ST-ZIP                                |   |                           |                                       | 3.4. CI                      | (Y - S          | T-Z(P                                 |  |
| TIFLE                                      | ,   |                           | DELETE                                | 4.1 10                       | LE              |                                       | Change , ☐ Addition  |
| NAME                                       |   |                           |                                       | 4. 2 N/                      | ME              |                                       |  |
| STREET ADDRESS                             |   |                           |                                       | 4.3 ST                       | REE1            | ADDRESS                               | $\langle h/n/1 \rangle$  |
| CITY-ST-ZIP                                |   |                           |                                       | 4.4 CIT                      | Y-S1            | · ZIP                                 | // <i>/</i> ////   |
| TITLE                                      |   |                           | DELETE                                | 5.1 T(T                      |                 |                                       | Change Addition  |
| NAME                                       |   |                           |                                       | 5.2 NA                       | ME              |                                       | ·  |
| STREET ADDRESS                             |   |                           |                                       | 5.3 \$1                      | HEET A          | ADDRE\$S                              |  |
| CITY-ST-ZIP                                |   |                           |                                       | 5 4 Cit                      |                 |                                       |  |
| TITLE                                      |   |                           | DELETE                                | 6.1 1/1                      |                 |                                       | ☐ Change ☐ Addition  |
| NAME                                       |   |                           |                                       | 6.2 NA                       | ME              |                                       | 800002570098   |
| STREET ADDRESS                             |   |                           |                                       | 63 517                       | REET A          | annerss                               | -66/29/9901999019  |

14. Thereby 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 supplicancental 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 direction or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears to Block 12 or Block 13 i Thanged, or or an affection of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears to Block 12 or Block 13 i Thanged, or or an affection of the context of the conte