

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  
Apr 27, 1999 8:00 am  
Secretary of State

04-27-1999 90069 049 \*\*\*150.00

DOCUMENT # P97000106732

1. Corporation Name  
HEART OF FLORIDA AUTO BODY, INC.



Principal Place of Business  
9880 SIDNEY HAYES ROAD  
ORLANDO FL 32809

Mailing Address  
9880 SIDNEY HAYES ROAD  
ORLANDO FL 32809

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/18/1997

2. Principal Place of Business

21 290 4th St

Suite, Apt. #, etc.

22 City & State

23 Orlando FL

24 Zip 32824

25 County Orange

2a. Mailing Address

26 290 4th St

Suite, Apt. #, etc.

27 City & State

28 Orlando FL

29 Zip 32824

30 County Orange

4. FEI Number

59-3482232

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

9. Name and Address of Current Registered Agent

PADGETT, STAN  
9993 TRIPLE CROWN CIR.  
ORLANDO FL 32825

10. Name and Address of New Registered Agent

81 Name John P Padgett  
82 Street Address (P.O. Box Number is Not Acceptable)  
5897 Crest Ln  
83 Lakeland FL  
84 City FL 85 Zip Code 33813

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 John Padgett

(NOT Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE V  
NAME PADGETT, JOHN  
STREET ADDRESS 5897 CREST LANE  
CITY-ST-ZIP LAKELAND FL 33313

TITLE P  
NAME PADGETT, STAN  
STREET ADDRESS 9993 TRIPLE CROWN CIRCLE  
CITY-ST-ZIP ORLANDO FL 32825

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President  
1.2 NAME John Padgett  
1.3 STREET ADDRESS 5897 Crest Ln  
1.4 CITY-ST-ZIP Lakeland FL 33813 ☒ Change ☐ Addition

2.1 TITLE J P  
2.2 NAME Shirley Padgett  
2.3 STREET ADDRESS 5897 Crest Ln  
2.4 CITY-ST-ZIP Lakeland FL 33813 ☐ Change ☒ Addition

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

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

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ 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:

John Padgett

SIGNATURE IS AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-99 407 855-4905

Date

Daytime Phone #

CR2E034 (11/98)

0105630