## 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 # P98000009377

1. Corporation Name

SUNDIN'S AUTOMOTIVE, INC.

Principal Place	of Business	Mailing Add	fress				1 1001(001 1(8 18(8) 10))	,	, ,,,,, , ,	
1511 S. VOLUSIA AVE. 1511 S. VO		. Volusia ave. Je City FL 32763				DO NOT WRITE IN TH	IS SPACE	i.		
							3. Date Incorporated or Qualifed 01/26/1998			
2. Principal Place of Business 2a. Mailing Address 21 26			Address				4. FEI Number 59-3490552	Applied For Not Applicable		
Suite, Apt.	#, etc.	Suite, A	Suite, Apt. #, etc.				5. Certifcate of Status Desired	• -	<b>75</b> Ad e Requ	ditional uired
City & State	9	City & S	State				6. Election Campaign Financing Trust Fund Contribution		.00 M ded to	
Zip	Country 25	Zip 29	h				This corporation owes the current year Personal Property Tax.	ntangible Yes		]No
	9. Name and Address of Curre	nt Registered Ag	ent				10. Name and Address of New Registers	d Agent		
A. n. ii	D.W. TODD			81	١	lame				
SUNDIN, TODD 1511 S. VOLUSIA AVE.			82	8	Street Addres	ss (P.O. Box Number is Not Acceptable)			***	
ORAI	NGE CITY FL 32763			83			<del></del>			
				84		City	F	LI	Zip Co	
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga-	ations of, Section	607.0505, Florida	Statutes	เกล	corporation	ration submits this statement for the purpose is board of directors. I hereby accept the appropriate (control of the purpose)	of changin pointment a	ig its regi	egistered stered
	Signature, typed or printed name of registered age		(NOTE: Reg	13.	nt sig	nature required w	ADDITIONS/CHANGES TO OFFICERS	AND DIRE	CTOR	S IN 12
TITLE	D OFFICERS AF	ND DIRECTORS	☐ DELETE	1.1 TITLE			ADDITIONS/GHANGES TO OFFICE NO.	☐ Cha		Addition
NAME	SUNDIN, TODD			1,2 NAME						
STREET ADDRESS	1511 S. VOLUSIA AVE.			1.3 STREE	TAD	DRESS				
CITY-ST-ZIP	ORANGE CITY FL 32763			1.4 CITY-S		ţ				
TITLE	D		☐ DELETE	2.1 TITLE		<u> </u>		Cha	inge	☐ Addition
NAME	HATTAWAY, MONICA			2.2 NAME						
STREET ADDRESS	1511 S. VOLUSIA AVE.			2.3 STREE	TAD	DRESS				
CITY-ST-ZIP	ORANGE CITY FL 32763			2. 4 CITY-5	ST-Z	IP				
TITLE - ~~			DELETE	3.1 TITLE		-   '	÷	-] Cha	inge	Addition
NAME				3.2 NAME		İ				
STREET ADDRESS				3.3 STREE		· '				
CITY-ST-ZIP			☐ DELETE	3.4. CITY- S 4.1 TITLE	ST-Z	IP		☐ Cha	ance	Addition
TITLE			- Decere	4.1 IIILC			•			
NAME				4.2 NAME		UDE66				
STREET ADDRESS				4.4 CITY-S		}				
C/TY-ST-Z/P			DELETE	5.1 TITLE	31-21	-		Cha	ange	Addition
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREE	CAT	DRESS				
CITY-ST-ZIP				5.4 CITY-S	ST-ZI	Р				
TITLE			☐ DELETE	6.1 TITLE				[] Cha	ange	☐ Addition
				6.2 NAME						

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 title 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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90026 041 \*\*\*150.00