

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 MAY 26 PM 1:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S43725
1. Corporation Name:

CAPITAL CITY COLLISION CENTER, INC.

Principal Place of Business:

Mailing Address:

1320 LAKE BRADFORD RD.
TALLAHASSEE, FL 32304

SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4/8/91

2. Principal Place of Business:

2a. Mailing Address:

21 1320 LAKE BRADFORD RD.

26 Suite, Apt. #, etc.

4. FLL Number

59-3070994

Applied For

Not Applicable

22 Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

23 City & State

27 City & State

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

23 TALLAHASSEE, FL

28 City & State

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

24 Zip 32304

25 Country USA

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DANNY C. HOLLON
5055 ICICLE HILL
TALLAHASSEE, FL 32303

81 Name
DANNY C. HOLLON

82 Street Address (P.O. Box Number is Not Acceptable)
1320 LAKE BRADFORD RD.

83

84 City
TALLAHASSEE

FL

85 Zip Code
32304

11. Pursuant to the provisions of Sections 607.0502 and 607.1308, 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

(Signature of the person who is the registered agent of the corporation)

(Signature of the registered agent, if the registered agent is not the corporation)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P/VP/T
NAME DANNY C. HOLLON
STREET ADDRESS 1320 LAKE BRADFORD RD
CITY-STATE-ZIP TALLAHASSEE, FL 32304

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

500002537095
-05/27/98--01089--004
*****150.00 *****150.00

TITLE DVP
NAME DANNY SCOTT HOLLON
STREET ADDRESS 1409 W. HEAVEN DR.
CITY-STATE-ZIP TALLAHASSEE, FL

☒ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

☐ Change

☐ Addition

TITLE S
NAME LARRY LANDRAM
STREET ADDRESS 1810 LK BRADFORD RD
CITY-STATE-ZIP TALLAHASSEE, FL

☒ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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 person or persons authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if I am a change of an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OF TITLE OF SIGNING OFFICER OR DIRECTOR

5-14-98

850-575-9202

CR2E034 (10/97)

(2)

Capital City
COLLISION
Center

(904) 575-9202 • Fax (904) 574-4233 • 1320 Lake Bradford Rd. • Tallahassee, FL 32304

May 26, 1998

To whom it may concern,

I am writing in reference to our 1998 Annual report.

The reason the report is late is due to us not getting our mail in a timely matter, it has been going to a different location, and we have a complaint with the Post Office. Please excuse our tardiness and waive the penalty.

Thank you,



Danny Hollon