FILED

Feb 08, 1999 8:00am

Secretary of State

02-08-1999 90063 023 ***150.00

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 # S86937 1. Corporation Name

FLORIDA AUCTION SCHOOL, INC.

| | • | | | | <u> </u> | IBB: EPB/I BIBIT BIBIT BIB | (A) | |
|--|---|---------------------------------------|---|---|---|--|--|---|
| Principal Plac | e of Business | Mailing Address | | | | | | |
| 5305 S. PINE AVE. 5305 S. PINE AVE. | | | | | | | | |
| OCALA FL 34480 US | | OCALA FL 34480 US | | | DO NOT WRITE IN THIS SPACE | | | |
| 03 | | 03 | | | 3. Date Incorporated or Qualifed | IN THIS SPACE | | |
| | | | | | 10/12/1991 | | | |
| 2. Principal P | Place of Business | 2a. Mailing Address | | | 4. FEI Number | | Applied For | ,, |
| 21 | | 26 | | | 59-3094847 | | Not Applicable | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | \$8.75 | Additional | 1 |
| 22 | | 27 | • | | 5. Certifcate of Status Desired [| | Required | |
| City & Stat | te | City & State | | | 6. Election Campaign Financing | - \$5.0 | 0 May Be | |
| 23 | | 28 | | | Trust Fund Contribution | , | d to Fees | |
| Žip | Country | Zip | Count | try | 8. This corporation owes the current | year Intangible | | |
| 24 | 25 | - 29 | 30 | | Personal Property Tax. | · 🔲 Yes | □No. | |
| • | Name and Address of Curr | | | _ | 10. Name and Address of New Reg | istered Agent | | |
| LIDE | COLUMN COLUMN | | 8 | Name | | | | |
| HUEBNER, MAX 5305 S PINE AVE | | `. | 82 Stn | | ress (P.O. Box Number is Not Acceptable | 9) | · | |
| | ALA FL 34480 | | | | a contract contract active contractives | mar and with the term with year at the | 1 41511 51511 1551 | |
| OCA | 1LA FL 34400 | |] 8 | 33 | | | | |
| | | , | 1 | 4 City | 3 4 7 4 7 5 4 2 7 4 7 4 7 5 7 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 | - 185 Zi | p Codé | |
| STATE OF THE STATE | 8-9: | was a second | | J., | | FL T | | |
| 11. Pursuant | to the provisions of Sections 607.0 | 502 and 607.1508, Florida Statu | tes, the abo | ve-named corp | poration submits this statement for the put | rpose of changing i | ts registered | |
| agent. La | im familiar with, and accept the obli | igations of, Section 607.0505, Flo | orida Statut | es. | on's board of directors. I hereby accept the | · | registered | |
| SIGNATURE | • | | | | | | İ | |
| | | | | | | | | |
| -10 | Signature, typed or printed name of registered a | | | gent signature require | | DATE | | 6 |
| 12. | OFFICERS A | AND DIRECTORS | 13. | · · · · · · | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECT | | 1,007 |
| TITLE | OFFICERS A | | 13. | 1 | | | | (44,00) |
| TITLE | OFFICERS A D HUEBNER, MAX | AND DIRECTORS | 13. 1.1 TITLE 1.2 NAM | E | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECT | | 144,000 |
| TITLE NAME STREET ADDRESS | OFFICERS OF HUEBNER, MAX 5305 S. PINE AVE. | AND DIRECTORS | 13. 1.1 TITLE 1.2 NAM 1.3 STRE | E E EET ADDRESS | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECT | | 70077477007 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL | AND DIRECTORS | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY | E EET ADDRESS -ST-ZIP | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECT | e Addition | 1000 14 1/00) |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL | AND DIRECTORS | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE | E EET ADDRESS -ST-ZIP | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECT | e Addition | CD0[44]/00/ |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE | AND DIRECTORS | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM | E E EET ADDRESS -ST-ZIP E | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECT | e Addition | CDOECOX (44)00) |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE | AND DIRECTORS DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECT | e Addition | CBOECOX (44/00) |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | AND DIRECTORS DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY | E E EET ADDRESS -ST-ZIP E E EET ADDRESS | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECT Change | e Addition | CBOECO3/ /44/00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | AND DIRECTORS DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECT | e Addition | VDDCC07/141/001 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | AND DIRECTORS DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECT Change | e Addition | VD05607/741/001 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME: STREET ADDRESS STREET ADDRESS | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | AND DIRECTORS DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECT Change | e Addition | VB0144/1/600 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME: STREET ADDRESS CITY-ST-ZIP | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | AND DIRECTORS DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 3.4 CITY | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFICE | ERS AND DIRECT Change | Addition Addition | VB0E007 (44)00) |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | AND DIRECTORS DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 3.4. CITY 4.1 TITLE | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFICE | ERS AND DIRECT Change | Addition Addition | VDD2E007 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME NAME NAME NAME NAME NAME | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | AND DIRECTORS DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 4.4 CITY 4.1 TITLE 4.2 NAM | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFICE | ERS AND DIRECT Change | Addition Addition | (00) 141 XCODCOO |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME: STREET ADDRESS CITY-ST-ZIP TITLE NAME: STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | AND DIRECTORS DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 4.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFICE | ERS AND DIRECT Change | Addition Addition | /00/14///00/ |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFICE | Change ☐ Change | Addition Addition Addition | VB00000 (44,000) |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | AND DIRECTORS DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 4.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFICE | ERS AND DIRECT Change | Addition Addition Addition Addition | 199/ 1/4/1000 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFICE | Change ☐ Change | Addition Addition Addition Addition Addition | VB02E007 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAM 5.3 STRE 5.2 NAM 5.3 STRE | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFICE | Change ☐ Change | Addition Addition Addition Addition Addition | 18.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | DELETE DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFICE | ☐ Change ☐ Change ☐ Change ☐ Change | Addition Addition Addition Addition Addition | 71 (28.0) |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | D HUEBNER, MAX 5305 S. PINE AVE. OCALA FL D HUEBNER, LAVERNE 5305 S PINE AVE OCALA FL | DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAM 1.3 STRE 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAM 5.3 STRE 5.4 CITY 5.1 STRE 5.4 CITY 5.1 STRE 5.4 CITY 5.3 STRE 5.4 CITY | E E E E E E E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OFFICE | Change ☐ Change | Addition Addition Addition Addition Addition | 7000E00 |

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, on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

352-732-6991