SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/1/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
1995 JUL 25 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V09389** **(0)**

1. Corporation Name
SUPERIOR TRUCK TIRE SERVICE, INC.

Principal Place of Business	Mailing Address
3308 LOWERY STREET NAVARREE FL 32566	3308 LOWERY STREET NAVARREE FL 32566

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/24/1992**
3a. Date of Last Report: **04/25/1994**

2. Principal Place of Business
21: 3258 HWY 87
22: Suite, Apt. #, etc:
23: City & State: NAVARRE FL
24: Zip: 32566
25: Country:

2a. Mailing Address
26: 3258 HWY 87
27: Suite, Apt. #, etc:
28: City & State: NAVARRE FL
29: Zip: 32566
30: Country:

4. FEI Number: **59-3101629** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WESSON, RONALD S.
3308 LOWERY STREET
NAVARREE FL 32566

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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: _____ DATE
(Signature of new registered agent, if registered agent is changed) (Signature of registered agent, if registered agent is not changing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PS	11 TITLE	PS ☒ Change ☐ Addition
NAME	WESSON, RONALD S.	12 NAME	HARVELL, WESLEY S.
STREET ADDRESS	% 3308 LOWERY STREET	13 STREET ADDRESS	3258 HWY 87
CITY ST ZIP	NAVARRE FL	14 CITY ST ZIP	NAVARRE, FL 32566
TITLE	VS	21 TITLE	VP ☒ Change ☐ Addition
NAME	HARVELL, WESLEY S.	22 NAME	WESSON, RONALD S.
STREET ADDRESS	% 3308 LOWERY STREET	23 STREET ADDRESS	3308 LOWERY ST
CITY ST ZIP	NAVARRE FL	24 CITY ST ZIP	NAVARRE FL 32566
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 the 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.

SIGNATURE: Wesley Harvell 7-20-95
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date — Daytime Phone #
WESLEY HARVELL

0175043 FP