

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 614781

**Entity Name:** JACK LYONS TRUCK PARTS, INC.

**Current Principal Place of Business:**

8482 N.W. 96 STREET  
MEDLEY, FL 33166

**Current Mailing Address:**

8482 N.W. 96 STREET  
MEDLEY, FL 33166

**FEI Number:** 59-1897294

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LYONS, JACK JR.  
8482 N.W. 96 STREET  
MEDLEY, FL 33166 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name LYONS, JACK JR..  
Address 8482 N.W. 96 STREET  
City-State-Zip: MEDLEY FL

Title VP  
Name LYONS, PATRICK J.  
Address 8482 NW 96TH STREET  
City-State-Zip: MEDLEY FL 33166

Title SD  
Name LYONS, PATRICK J.  
Address 8482 NW 96TH STREET  
City-State-Zip: MEDLEY FL 33166

Title TREASURER  
Name LYONS, II, PATRICK J.  
Address 8482 N.W. 96 STREET  
City-State-Zip: MEDLEY FL 33166

Title ASST. SECRETARY  
Name LYONS III, JOHN L.  
Address 8482 N.W. 96 STREET  
City-State-Zip: MEDLEY FL 33166

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** NELSON TELLO

**OFFICE MANAGER**

**02/07/2018**

Electronic Signature of Signing Officer/Director Detail

Date