

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

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**Apr 07 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 167244 (3)
1. Corporation Name
FERMAN MOTOR CAR COMPANY, INC.



Principal Place of Business P.O. BOX 1321 TAMPA FL 33601	Mailing Address P.O. BOX 1321 TAMPA FL 33601-1321
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/03/1951	3a. Date of Last Report 05/01/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-0240570		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent UITERWYK, STEVEN A. 1307 W KENNEDY BLVD TAMPA FL 33606				10. Name and Address of New Registered Agent	
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)	
83				84 City	
				85 Zip Code FL	

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE AS	<input type="checkbox"/> DELETE	1.1 TITLE PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME UITERWYK, STEVEN A		1.2 NAME FERMAN, JAMES L. JR.	
STREET ADDRESS 1307 W KENNEDY BLVD.		1.3 STREET ADDRESS 1307 W. Kennedy Blvd.	
CITY-ST-ZIP TAMPA FL 33601		1.4 CITY-ST-ZIP Tampa, FL 33606	
TITLE CO	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FERMAN, JAMES L SR		2.2 NAME	
STREET ADDRESS 1307 W KENNEDY BLVD.		2.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL		2.4 CITY-ST-ZIP	
TITLE VSD	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FERMAN, MARTHA S		3.2 NAME	
STREET ADDRESS 1307 W KENNEDY BLVD.		3.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL		3.4 CITY-ST-ZIP	
TITLE TD	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FERMAN, CECELIA D.		4.2 NAME	
STREET ADDRESS 1307 W KENNEDY BLVD.		4.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL		4.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME JANICE F. STRASKE		5.2 NAME	
STREET ADDRESS 1307 W KENNEDY BLVD.		5.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL		5.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LAURA F. FARRIOR		6.2 NAME	
STREET ADDRESS 1307 W KENNEDY BLVD.		6.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL		6.4 CITY-ST-ZIP	
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14. I do 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. 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 from the attachment with an address.

SIGNATURE: Steven A. Uiterwyk 4/28/97 813-251-2765
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)