

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90045 017 ****61.25

DOCUMENT # 703605

1. Corporation Name

CENTRAL FLORIDA AUTO DEALERS ASSOCIATION, INC.

Principal Place of Business

7380 SAND LAKE RD
SUITE 500
ORLANDO FL 32819

Mailing Address

7380 SAND LAKE RD
SUITE 500
ORLANDO FL 32819



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

30

3. Date Incorporated or Qualified

12/28/1961

4. FEI Number

59-1111836

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

9. Name and Address of Current Registered Agent

G. CHARLES WOHLUST
230 LOOKOUT PLACE
MAITLAND FL 32751

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **RODRIGUEZ, FRANK J.**
STREET ADDRESS **5700 E. COLONIAL DRIVE**
CITY-ST-ZIP **ORLANDO FL**

TITLE **M** ☐ DELETE

NAME **MILLER, BARBARA A.**
STREET ADDRESS **7380 SAND LAKE RD STE 500**
CITY-ST-ZIP **ORLANDO FL**

TITLE **D** ☐ DELETE

NAME **WILLIAMSON, JOSEPH M**
STREET ADDRESS **2830 N ORANGE BLOSSOM TRAIL**
CITY-ST-ZIP **KISSIMEE FL**

TITLE **D** ☒ DELETE

NAME **MURPHY, ALAN L**
STREET ADDRESS **8951 S ORANGE BLOSSOM TR**
CITY-ST-ZIP **ORLANDO FL**

TITLE **VPD** ☐ DELETE

NAME **HOLLER, CHRISTOPHER**
STREET ADDRESS **500 PARK AVE. SOUTH SUITE 202**
CITY-ST-ZIP **WINTER PARK FL**

TITLE **STD** ☐ DELETE

NAME **BROWN, WILLIAM D.**
STREET ADDRESS **6239 ORANGE BLOSSOM TR**
CITY-ST-ZIP **ORLANDO FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

D ☒ Change ☐ Addition
RODRIGUEZ, FRANK J.

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☒ Change ☐ Addition
12801 S. ORANGE BLOSSOM TRAIL
ORLANDO FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☒ Change ☐ Addition
PD
301 S. ORLANDO AVE, STE 200
MAITLAND FL

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Barbara A. Miller (BARBARA A. Miller)

3/3/99

407/352-5243

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)

192730-90045-17
703605

CENTRAL FLORIDA AUTO DEALERS ASSOCIATION, INC.

FEI Number: 59-1111836

Nonprofit Corporation Annual Report 1999 continued:

13. Officers and Directors

VPD

Nahas, George E.
200 E. Burleigh Ave
Tavares FL

D

Black, Gaylon D.
1551 E. Semoran Ave
Apopka FL

D

Chavara, Joe
2055 W. Colonial Dr
Orlando FL

D

Matthews, Irving J.
17701 U.S. Hwy. 441
Mt. Dora FL

D

Jill Holler Rogers
301 S. Orlando Ave
Suite 200
Maitland FL

D

W. W. Stephens
3883 W. Colonial Dr
Orlando FL