## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 11, 2004 8:00 am Secretary of State

Principal Place of Business   Mailing Address   Addres	DOCUMENT # C9200000007  1. Entity Name FORD DEALERS ADVERTISING FUND, INC., JACKSONVILLE DIVISION							y <b>O1</b> 566 16 009 ****61		
Sulfie. Apt. 4 etc.    Sulfie. Apt. 4 etc.   Sulfie. Apt. 4 etc.   O2112004   Chg.NP   CR26937 (10/03)   Chy & State   Chy & State   A. FEI Number   S9-0965458   Applied for S9-0965458   No. Applied for S9-0965458   Section   No. Applied for S9-0965458   Section   No. Applied for S9-0965458   No. Applied for S9-096548   No. Applied for S9-09654	7400 BAYME STE 101 JACKSONVILL	EADOWS WAY LE, FL 32256 US	7400 BAYMEADOWS W STE 101 JACKSONVILLE, FL 32.	7400 BAYMEADOWS WAY STE 101 ACKSONVILLE, FL 32256 US						
City & State  Country	2. Principal P	lace of Business	3. Mailing Address	Mailing Address				! <b>                                     </b>		
Separation   Sep	Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		02112004 Cr	ng-NP C	R2E037 (10/03)		
September   Country   September   Septem	City & State		City & State			 8	<b>├</b>			
SMITH, HULSEY & BUSEY 1800 FIRST UNION BANK TOWER 225 WATER STREET JACKSONVILLE, FL 32201  6. 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. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent are the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent are the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent are the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent are the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the object of the	Zip	Country	Zip	Col	intry	5. Certificate of St.	atus Desired [	¬ \$8.75 Add	litional	
SMITH, HULSEY & BUSEY 1800 FIRST UNION BANK TOWER 225 WATER STREET  JACKSONVILLE, FL 32201  8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  **SIGNATURE**  **FILING Fee is \$61.25 **Due by May 1, 2004  **Due by May 1, 2004		6. Name and Address of Current I	Registered Agent	<u> </u>		7. Name and Add	ress of New Regis			
225 WATER STREET  JACKSONVILLE, FL 32201  2										
B. 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. 1 am familiar with, and accept the obligations of registered agent.  V.  SIGNATURE    Daywour, tyced of priving name of registered agent and tive if applicable. (NOTE Registered Agent spreads reduced when reducating)   DATE	_225 WATE	R STREET			Street Address	Street Address (P.O. Box Number is Not Acceptable)				
SIGNATURE    Signature, hybrid or printed rame of registated agent, and the purpose of changing its registatered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the purpose of registered agent, or both, in the State of Florida. I am familiar with, and accept the purpose of registered agent, or both, in the State of Florida. I am familiar with, and accept the purpose of registered agent, or both, in the State of Florida. I am familiar with, and accept the purpose of registered agent, or both, in the State of Florida. I am familiar with, and accept the purpose of registered agent, or both, in the State of Florida. I am familiar with, and accept the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the purpose of the purpo	JACKSON	VIL <b>L</b> E, FL 32201	- · · · · · · · · · · · · · · · · · · ·		Cin			T = 0 (		
The obligations of registered agent.  SIGNATURE    Signature, typed or printed rend of registered agent and life if applicable.   NOTE Registered Agent signature reconstating)   DATE	عَلَّا الْعَالَ				City			FL Zip Cour	<i>*</i>	
Filing Fee is \$61.25 Due by May 1, 2004  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ITILE D BUCKINGHAM, WILLIAM T 9550 ATLANTIC BLVD. JACKSONVILLE, FL 32225  ITILE D MAKE STREET ADDRESS CITY-ST-2P  TITLE D KOPP, TONY 2415 BABCOCK STREET STE C CITY-ST-2P  MAKE CITY-ST-2P  MAKE MAKE STREET ADDRESS CITY-ST-2P  MELBOURNE, FL 32901  TITLE MAKE STREET ADDRESS STREET ADDRESS CITY-ST-2P  MELBOURNE, FL 32901  TITLE MAKE STREET ADDRESS CITY-ST-2P  MELBOURNE, FL 32901  TITLE MAKE STREET ADDRESS CITY-ST-2P  MELBOURNE, FL 38624  TITLE MAKE STREET ADDRESS CITY-ST-2P  TI	the obligations of registered agent.									
Trust Fund Contribution. Added to Fees   Florida Department of State    10.		Signature, typed or printed name of registered agent a	and title if applicable. (NOT	E: Registere	d Agent signature require	d when reinstating)		DATE		
TITLE DUCKINGHAM, WILLIAM T 9650 ATLANTIC BLVD.  GITY-ST-ZP JACKSONVILLE, FL 32225  TITLE DUCKINGHAM, WILLIAM T 9650 ATLANTIC BLVD.  JACKSONVILLE, FL 32225  TITLE DUCKINGHAM, WILLIAM T 9650 ATLANTIC BLVD.  JACKSONVILLE, FL 32225  TITLE DUCKINGHAM, WILLIAM T 9650 ATLANTIC BLVD.  JACKSONVILLE, FL 32225  TITLE MAME STREET ADDRESS CITY-ST-ZP  APOPKA, FL 32703  TITLE NAME KOPP, TONY Delate KOPP, TONY STREET ADDRESS CITY-ST-ZP  TITLE NAME STREET ADDRESS CITY-ST-ZP  TITLE DUCKINGHAM, WILLIAM T 9650 ATLANTIC BLVD.  TITLE NAME STREET ADDRESS CITY-ST-ZP  TITLE DUCKINGHAM, WILLIAM T 9650 ATLANTIC BLVD.  TITLE DUCKINGHAM, WILLIAM T 9650 ATLANTIC BLVD.  TITLE NAME STREET ADDRESS CITY-ST-ZP  TITLE DUCKINGHAM, WILLIAM T 9660 ATLANTIC BLVD.  TITLE NAME STREET ADDRESS CITY-ST-ZP  TITLE NAME STREET						Added to Fees Florida Department of State				
NAME STREET ADDRESS OF ATLANTIC BLVD.  STREET ADDRESS OF ATLANTIC BLVD.  JACKSONVILLE, FL 32225  Delete  MULLINAX, GERALD  1851 EAST SEMORAN BLVD  APOPKA, FL 32703  TITLE  NAME  STREET ADDRESS  CITY-ST-ZP  APOPKA, FL 32703  TITLE  NAME  SIREET ADDRESS  CITY-ST-ZP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZP  TITLE  D  Change  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  AMAE  STREET ADDRESS  CITY-ST-ZP  TITLE  D  Change  Addition  AMAE  STREET ADDRESS  CITY-ST-ZP  TITLE  D  CURRIE, BILL III  STREET ADDRESS  CITY-ST-ZP  TITLE  AMAE  ADDRESS  CITY-ST-ZP  ADDRESS  CITY-				_		ADDITIONS/CHANG	ES TO OFFICERS A		1	
MULLINAX, GERALD  STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NOKOMIS, FL 33555  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  THE  NAME STREET ADDRESS CITY-ST-ZIP	NAME - STREET ADDRESS	BUCKINGHAM, WILLIAM T 9650 ATLANTIC BLVD.	∟i Delete	NAM STRE	E ET ADDRESS			∐ Change		
NAME SIREET ADDRESS CITY-ST-ZIP  TITLE D WALKER, FRANK STREET ADDRESS CITY-ST-ZIP  TITLE D CLEARWATER, FL 34624  TITLE D CURRIE, BILL III STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE D CURRIE, BILL III STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Belete  TITLE NAME STREET ADDRESS CITY-ST-ZIP  BELL III STREET ADDRESS CITY-ST-ZIP STREET	NAME STREET ADDRESS	MULLINAX, GERALD 1851 EAST SEMORAN BLVD	☐ Delete	NAM STRE	E ET ADDRESS			☐ Change	Addition	
NAME   WALKER, FRANK   NAME   STREET ADDRESS   CITY-ST-ZIP   CLEARWATER, FL 34624   CITY-ST-ZIP    TITLE   D	NAME STREET ADDRESS	KOPP, TONY 2415 BABCOCK STREET STE C		NAM STRE	E ET ADDRESS			☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP NOKOMIS, FL 33555  TITLE NAME STREET ADDRESS CITY-ST-ZIP NOKOMIS, FL 33555  TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STRE	NAME STREET ADDRESS	WALKER, FRANK 17556 U.S. HWY. 19 NORTH	☐ Delate	NAM STRE	E ET ADDRESS			Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP King, Lee 3565 Community Rd. Brunswick, GA. 31520	NAME STREET ADDRESS	CURRIE, BILL III 130 N TAMIAMI TRAIL	☐ Delete	NAM STRE	E ET ADDRESS			Change	☐ Addition	
L 12 I horany cariny that the information cumplied with this thing does not duality for the examples stated in Section 110 07/29/i). Floride Statutes, I turbor coefficities that the information — I	NAME STREET ADDRESS CITY-ST-ZIP			NAM Stre City	E Kin ET ADDRESS 356 -SI-ZIP Bru	5 Community Inswick, GA.	31520			

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1 (9.07(3)(1), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

904-737-5444

Date

Daytime Phone #

## Affaciment

901 S Beltline Hwy. Mobile, AL 36606

		Affa Ch	ment	
, , a :	, OTHER DIRECTORS			
. <del></del>	- D	( 92000	() D	
7	Fred H. Bozard, III 1700 Ponce DeLeon Blvd. St. Augustine, FL 32084	(Delete) 60007	Brian D. Jarrett 1550 U.S. Highway 27 South Haines City, FL. 33844	(Delete)
*16-2	D James M. Poffenbaugh 1118 13th Street St. Cloud, FL 34769		D Frank J. Rodriguez 5700 East Colonial Dr. Orlando, FL. 32807	(Delete)
	D Douglas W. Smith 1908 S McCall Road Englewood, FL 34223		D Paul D. Clark 3518 East State Rd 200 Yulee, FL. 32097	
	V/S/T/D Russell L. Reid 1875 S Orlando Avenue Maitland, FL 32751		D Benny Robles 425 East Van Fleet Dr. Bartow, FL. 33830	
: <del></del>	P/C/D Steve Everett 215 W. Magnolia Ave. Valdosta, GA 31603	e grande e e e e e e e e e e e e e e e e e e	D N. D. Redmond Jr. 1709 E Shotwell Street Bainbridge, GA 31717	مسموی کی جمعی دی از در
	D James Flammer 41975 U.S. Hwy.19 North Tarpon Springs, FL. 34689		D James E. Peach 202 Hwy. 31 South Brewton, AL. 36426	
	D Steve Waters III Ware Street & Hwy. 82 Blackshear, GA. 31516		D John W. Drakesmith 2424 John Young Pkwy. Orlando, FL. 32804	(Delete)
د م∾د پستند	D Margie C. Mason 120 South Main Street Blountstown, FL. 32424	(Delete)	D Scott Struebing 730 West 15 <sup>th</sup> St. Panama City, FL. 32401	(Add)
	D Steven Drakesmith 2424 John Young Pkwy. Orlando, FL. 32804	(Add)	D Bill Jarrett 1305 U.S. Hwy. 27 North Avon Park, FL. 33825	
	D Joe Gerard 7311 Airport Blvd. Mobile, AL 36608	(Add)	D Jim Scott 13720 Hwy. 301 Dade City, FL. 33525	(Add)
	D Rick Doran	(Delete)		