

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JAN 17 PH 1:40

DOCUMENT # **G40411** (2)

1. Corporation Name  
**LOU BACHRODT CHEVROLET, INC.**

Principal Place of Business  
**1801 W ATLANTIC BLVD  
P.O. BOX 939  
POMPANO BEACH FL 33069**

Mailing Address  
**1801 W ATLANTIC BLVD  
P.O. BOX 939  
POMPANO BEACH FL 33069**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/20/1983** 3a. Date of Last Report **01/19/1994**

4. FEI Number **59-2295180** Applied For  Not Applicable

5. Certificate of Status Desired **RX** \$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

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

**FLEMING, O'BRYAN & FLEMING, P.A.  
500 E. BROWARD BLVD., 7TH FL.  
ATTN: WDR  
FT. LAUDERDALE FL 33394**

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 \_\_\_\_\_ (Name) Registered Agent (signature required when registering) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BACHRODT, LOUIS C, III	1.2 NAME	
STREET ADDRESS	1801 W ATLANTIC BLVD	1.3 STREET ADDRESS	
CITY, ST, ZIP	POMPANO BEACH FL	1.4 CITY, ST, ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BACHRODT, LOUIS C., JR.	2.2 NAME	
STREET ADDRESS	7070 CHERRYVALE BLVD N	2.3 STREET ADDRESS	
CITY, ST, ZIP	ROCKFORD IL	2.4 CITY, ST, ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KLINGER, SIDNEY	3.2 NAME	
STREET ADDRESS	7070 CHERRYVALE N BLVD	3.3 STREET ADDRESS	
CITY, ST, ZIP	ROCKFORD IL	3.4 CITY, ST, ZIP	
TITLE	ST	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KMETZ, GERALD	4.2 NAME	
STREET ADDRESS	1801 W ATLANTIC BLVD	4.3 STREET ADDRESS	
CITY, ST, ZIP	POMPANO BEACH FL	4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing was voluntarily furnished and does not equally for the exemption stated in Section 199.07(1)(b), Florida Statutes. I further certify that the information included 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 887, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment to this return.

SIGNATURE: **GERALD KMETZ** *[Signature]* **01/07/95** **305/971-3000**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)