

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

1062

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED
97 SEP -5 PM 12: 35
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # J81878 (7)
 1. Corporation Name
SMART GROUP ACCEPTANCE CORPORATION



Principal Place of Business 4100 TAMiami TRAIL N. NAPLES FL 33940	Mailing Address 4100 TAMiami TRAIL N. NAPLES FL 33940
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DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business	26 2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
24	29
Country	Country
25	30

3. Date Incorporated or Qualified 07/07/1987	3a. Date of Last Report 02/20/1996
4. FEI Number 59-2851653	Applied For Not Appl cable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

DEVOE, RICHARD H.
3272 GREEN DOLPHIN LANE
NAPLES FL 33940

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 _____
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DEVOE, RICHARD H.	
STREET ADDRESS	4100 TAMiami TRAIL N.	
CITY-ST-ZIP	NAPLES FL	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	DEVOE, MARK A.	
STREET ADDRESS	4100 TAMiami TRAIL N.	
CITY-ST-ZIP	NAPLES FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	DEVOE, DONALD P.	
STREET ADDRESS	4100 TAMiami TRAIL N.	
CITY-ST-ZIP	NAPLES FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	DEVOE, GARY R.	
STREET ADDRESS	4100 TAMiami TRAIL N.	
CITY-ST-ZIP	NAPLES FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 ****165.00 ****165.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* Mark A. DeVoe - Vice President 8/29/97 (941)261-1224

CR2E034 (4/97)



2062

AUTOMOTIVE

1411 Solana Road • Naples, Florida 34103 • (941) 649-1100 • (941) 649-0008

August 29, 1997

D.B.A.

DeVoe Cadillac
4100 Tamiami Trail N.
Naples, FL 34103
(941) 261-1234

DeVoe
Sunshine Buick-Isuzu
1411 Solana Road
Naples, FL 34103
(941) 649-1100

DeVoe Pontiac
GMC Truck
2601 Airport Road
Naples, FL 34112
(941) 774-1313

DeVoe Pontiac
GMC Truck
Sunshine Buick
10380 Bonita Beach Rd. E
Bonita Springs, FL 34135
(941) 495-2115

DeVoe Infinity
3388 Fowler Street
Fort Myers, FL 33901
(941) 278-0014

DeVoe Volvo
3322 Fowler Avenue
Fort Myers, FL 33901
(941) 936-8866

DeVoe EZ Buy & Ride
2601 Airport Road
Naples, FL 34112
10380 Bonita Beach Rd. E.
Bonita Springs, FL 34135
(941) 495-2115

AFFILIATES

DeVoe's Inc.
P.O. Box 1098
Naples, FL 34106

DeVoe Inc. II
P.O. Box 1098
Naples, FL 34106

Smart Group Acceptance
Corporation
P.O. Box 1098
Naples, FL 34106

D.B.A.
Smart Ad. Group
P.O. Box 1098
Naples, FL 34106

State of Florida
Division of Corporations
Annual Reports Section
P.O. Box 6327
Tallahassee, FL 32314

RE: Dick DeVoe Buick-Cadillac, Inc. Document 821246
DeVoe's Inc. Document 339099
Smart Group Acceptance Corporation Document J81878
DeVoe Inc. II Document P94000006294

Dear Sir or Madam:

Please find enclosed our Profit Corporation Annual Report for 1997 for the above companies.

We did not receive the first renewal package.

I have called the Annual Reports Section and they advised me to pay the \$165.00 due and send to the above address.

If you have any questions, please call me at (941) 649-1100 ext. 406.

Thank you.

Sincerely,

Christine Fickey
Controller

Enc.