FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED
95 MAY -1 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M86728** **(6)**

1. Corporation Name
DESOTO FORD-MERCURY, INC.

Principal Place of Business
114 N POLK AVE
PO BOX 190
ARCADIA FL 33821

Mailing Address
114 N POLK AVE
PO BOX 190
ARCADIA FL 33821

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/23/1988
3a. Date of Last Report: 03/29/1994

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

4. FEI Number: 65-0055268 — 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
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
SCHLUNDT, MARK
25434 RAMPART BLVD.
PUNTA GORDA FL 33983

10. Name and Address of New Registered Agent
81 Name: MARK SCHLUNDT
82 Street Address (P.O. Box Number is Not Acceptable): 1875 CITRON ST.
83 City: CHARLOTTE HARBOR
84 State: FL
85 Zip Code: 33980

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 of a new registered agent either individually or on behalf of a corporate registered agent) (Signature of Registered Agent applying to be an officer or director) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☒ Change ☐ Addition
NAME	SCHLUNDT, MARK	1.2 NAME	
STREET ADDRESS	25434 RAMPART BLVD.	1.3 STREET ADDRESS	1875 CITRON ST.
CITY, ST, ZIP	PUNTA GORDA FL	1.4 CITY, ST, ZIP	CHARLOTTE HARBOR, FL 33980
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	CHRISTOPHERSON, CHARLES	2.2 NAME	
STREET ADDRESS	196 SANTOS DR	2.3 STREET ADDRESS	
CITY, ST, ZIP	PUNTA GORDA FL	2.4 CITY, ST, ZIP	
TITLE	V	3.1 TITLE	☐ Change ☐ Addition
NAME	KRATZER, MATTHEW	3.2 NAME	
STREET ADDRESS	18140 BRACKEN CIR	3.3 STREET ADDRESS	
CITY, ST, ZIP	PT CHARLOTTE FL	3.4 CITY, ST, ZIP	
TITLE	ST	4.1 TITLE	☒ Change ☐ Addition
NAME	SCHLUNDT, PATRICIA	4.2 NAME	
STREET ADDRESS	25434 RAMPART BLVD.	4.3 STREET ADDRESS	1875 CITRON ST.
CITY, ST, ZIP	PUNTA GORDA FL	4.4 CITY, ST, ZIP	CHARLOTTE HARBOR, FL 33980
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on the 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of Changes to an attachment with an address.

SIGNATURE: 2-15-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

0447410 FP