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Apr 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N32251 (3)
1. Corporation Name
MARION COUNTY TIRE DEALERS ASSOCIATION, INC.



Principal Place of Business: 10950 SE HWY 441, BELLEVIEW FL 34420 US
Mailing Address: 10950 SE HWY 441, BELLEVIEW FL 34420-3852 US

3. Date Incorporated or Qualified: 05/11/1989
3a. Date of Last Report: 10/17/1996

2. Principal Place of Business (21-24): Suite, Apt. #, etc.; City & State; Zip; Country
2a. Mailing Address (26-30): Suite, Apt. #, etc.; City & State; Zip; Country

4. FEI Number: NOT APPLICABLE (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
GAZDA, ROBERT L
10950 SE HWY 441
BELLEVIEW FL 34420

10. Name and Address of New Registered Agent (81-85): Name; Street Address (P.O. Box Number is Not Acceptable); City; State (FL); 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	P	GAZDA, ROBERT L	10950 SE HWY 441 BELLEVIEW FL 34420	<input type="checkbox"/> DELETE
TITLE	SD	GRIGGS, ERNEST	424 S MAGNOLIA AVE OCALA FL	<input type="checkbox"/> DELETE
TITLE	VD	INGRAD, JOE	3000 NW PINE AVE OCALA FL 34470	<input type="checkbox"/> DELETE
TITLE	TD	KNOBLOCK, VICTOR F.	221 W SILVER SPRGS BLVD OCALA FL	<input type="checkbox"/> DELETE
TITLE				<input type="checkbox"/> DELETE
TITLE				<input type="checkbox"/> DELETE

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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	

14. I do 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.

CR2E037 (9/96)