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CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 FEB 13 PM 12:04

DOCUMENT # N94000000896 (0)

1. Corporation Name

VOLUSIA COUNTY OLDSMOBILE DEALERS ASSOCIATION, I  
NC.

Principal Place of Business Mailing Address  
2800 S. HWY. 17-92 2800 S. HWY. 17-92  
DELAND FL 32720 DELAND FL 32720

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/21/1994 3a. Date of Last Report

4. FEI Number Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 Suits, Apt. #, etc. 26 Suits, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BONDESEN, FREDERIC R  
2800 S. HWY. 17-92  
DELAND FL 32720

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 Signature Required when registering)

FREDERIC R. BONDESEN, D.R.

1/24/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME BONDESEN, FREDERIC R  
STREET ADDRESS 2800 S. HWY. 17-92  
CITY-ST-ZIP DELAND FL 32720

1.1 TITLE  Change  Addition

TITLE D  
NAME HIGGINBOTHAM, DENNIS D  
STREET ADDRESS 1919 NORTH DIXIE FREEWAY  
CITY-ST-ZIP NEW SMYRNA BEACH FL 32169

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE D  
NAME HILL, LARRY  
STREET ADDRESS 451 NORTH NOVA RD.  
CITY-ST-ZIP DAYTONA BEACH FL 32115

2.1 TITLE  Change  Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FREDERIC R. BONDESEN, D.R.

2/6/95 904/734-2661