

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

FILED
Jan 23, 1996 08:00 AM
Secretary of State

DOCUMENT # **P93000073898 (7)**

1. Corporation Name

CENTRAL FLORIDA LINCOLN MERCURY, INC.



Principal Place of Business

2065 W. COLONIAL DRIVE
ORLANDO FL 32854
US

Mailing Address

1850 E. MERRIT ISLAND CSWY
MERRITT ISLAND FL 32952

2. Principal Place of Business

21 State Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified
10/25/1993

3a. Date of Last Report
01/20/1995

4. FEET Number
59-3208843

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

DEARDOFF, R. BRUCE
1850 E. MERRIT ISLAND CAUSEWAY
MERRITT ISLAND FL 32952

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 607.09(2) and 607.15(6), 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 607.09(6), Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	P	<input type="checkbox"/> DELETE
2. NAME	DEARDOFF, R. BRUCE	
3. STREET ADDRESS	2055 WEST COLONIAL DR.	
4. CITY, ST, ZIP	ORLANDO FL 32804	
5. TITLE	ST	<input type="checkbox"/> DELETE
6. NAME	CHENEY, E. RENEE	
7. STREET ADDRESS	1850 E. MERRIT ISLAND CSWY	
8. CITY, ST, ZIP	MERRITT ISLAND FL 32952	
9. TITLE	V	<input type="checkbox"/> DELETE
10. NAME	CHAVARA, JOE	
11. STREET ADDRESS	2055 WEST COLONIAL DR.	
12. CITY, ST, ZIP	ORLANDO FL	
13. TITLE		<input type="checkbox"/> DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		<input type="checkbox"/> DELETE
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I do hereby certify that the information supplied in this report 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 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 and in Block 14 on an attachment with an address.

SIGNATURE: *R.B. Deardoff* **R.B. Deardoff** 1/15/96 407-452-9220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone #

CR2E034 (12/95)