

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 # P94000006294 (0)
 1. Corporation Name
DEVOE, INC. II



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

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/25/1994	3a. Date of Last Report 02/20/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0462202	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	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				10. Name and Address of New Registered Agent			
DEVOE, RICHARD H 3272 GREEN DOLPHIN LANE SUITE 315 NAPLES FL 33940				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEVOE, RICHARD H	1.2 NAME	
STREET ADDRESS	4100 TAMiami TRAIL N	1.3 STREET ADDRESS	500002288025--1
CITY-ST-ZIP	NAPLES FL 33940	1.4 CITY-ST-ZIP	-09/09/97--01026--016
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	***165.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEVOE, MARK A	2.2 NAME	
STREET ADDRESS	4100 TAMiami TRAIL N	2.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33940	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEVOE, DONALD P	3.2 NAME	
STREET ADDRESS	1411 SOLANA RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33940	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEVOE, GARY R	4.2 NAME	
STREET ADDRESS	4100 TAMiami TRAIL N	4.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33940	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

8/29/97

SIGNATURE: *[Signature]* Mark A. DeVoe - Vice President (941) 261-1234

CR2E034 (4/97)



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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 E-Z 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.