

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000039876

FILED
Jan 06, 2003
Secretary of State

Entity Name: PINES LINCOLN MERCURY, INC.

Current Principal Place of Business:

14800 SHERIDAN ST
P.O. BOX 1400
PEMBROKE PINES, FL 33330

New Principal Place of Business:

Current Mailing Address:

12 E SUNRISE BLVD
FORT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 58-2321072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARDNER, GLENN
911 N.E. 2 AVENUE
FT. LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: HOLMAN, J S
Address: 350 STATION AVE
City-St-Zip: HADDONFIELD, NJ

Title: D () Delete
Name: KOLB, J W
Address: 407 CHESTER AVENUE
City-St-Zip: MOORESTOWN, NJ 08057

Title: D () Delete
Name: HOLMAN, M K
Address: 14 KENDLES RUN ROAD
City-St-Zip: MOORESTOWN, NJ 08057

Title: DP (X) Delete
Name: REIF, D S
Address: 2041 N.W. 86TH TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S () Delete
Name: MULLIN, K.A.
Address: 757 PADDOCK PATH
City-St-Zip: MOORESTOWN, NJ 08057

Title: T () Delete
Name: ROBERT, DAGLIAN
Address: 1836 GALLOP DRIVE
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GARDNER, GLENN
Address: 911 N E 2ND AVENUE
City-St-Zip: FT LAUDERDALE, FL 33304

Title: EVP (X) Change () Addition
Name: STRENG, LARRY
Address: 2084 AMESBURY CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: VP (X) Change () Addition
Name: CARISS, WILLIAM
Address: 7411 MAPLE AVENUE
City-St-Zip: PENNSAUKEN, NJ 18109

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: ROBERT, DAGLIAN W
Address: 1836 GALLOP DRIVE
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT W DAGLIAN

T

01/06/2003

Electronic Signature of Signing Officer or Director

Date