

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 748908

**FILED**  
**Feb 04, 2013**  
**Secretary of State**  
**CC1497315748**

**Entity Name:** FLORIDA AUTOMOBILE DEALERS ASSOCIATION

**Current Principal Place of Business:**

400 NORTH MERIDIAN STREET  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

400 NORTH MERIDIAN STREET  
TALLAHASSEE, FL 32301

**FEI Number:** 59-0245515

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SMITH, THEODORE LTED  
400 NORTH MERIDIAN STREET  
TALLAHASSEE, FL 32301 US

*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

**Officer/Director Detail :**

Title CHAIRMAN ELECT  
Name ROBERT, LEE  
Address 541 MARY ESTHER CUTOFF  
City-State-Zip: FORT WALTON FL 32548

Title PAST CHAIRMAN  
Name HODGES, DAVID  
Address P.O. BOX 382050  
City-State-Zip: JACKSONVILLE FL 32238

Title PRESIDENT  
Name SMITH, THEODORE L  
Address 400 N MERIDIAN STREET  
City-State-Zip: TALLAHASSEE FL 32301

Title CHAIRMAN  
Name MORGAN, LARRY  
Address 1101 EAST FLETCHER AVENUE  
City-State-Zip: TAMPA FL 33612

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** THEODORE L SMITH

**PRESIDENT**

**02/04/2013**

Electronic Signature of Signing Officer/Director Detail

Date