

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 151328

Entity Name: HOLMAN AUTOMOTIVE, INC.

Current Principal Place of Business:

12 E. SUNRISE BLVD.
FT LAUDERDALE, FL 33304

Current Mailing Address:

12 E. SUNRISE BLVD.
FT LAUDERDALE, FL 33304

FEI Number: 59-0573006

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GEORGE, MICHAEL
911 N.E. SECOND AVE.
FT. LAUDERDALE, FL 33304 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: MICHAEL GEORGE

02/18/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title COO
Name GARDNER, G. A
Address 911 NE 2ND AVENUE
City-State-Zip: FT LAUDERDALE FL 33304

Title ASST. SECRETARY, ASST. TREASURER
Name MARGARET, TRACZ
Address 911 NE 2ND AVE
City-State-Zip: FORT LAUDERALE FL 33304

Title ASST. SECRETARY, ASST. TREASURER
Name WOODHAM, JASON C
Address 911 NE 2ND AVE
City-State-Zip: FORT LAUDERDALE FL 33304

Title SECRETARY
Name MULLIN, K A
Address 244 E KINGS HWY
City-State-Zip: MAPLE SHADE NJ 08052

Title ASST. SECRETARY, ASST. TREASURER
Name STEVE, STUMER
Address 911 NE 2ND AVE
City-State-Zip: FT LAUDERDALE FL 33304

Title VP
Name GEORGE, MICHAEL
Address 911 NE 2ND AVE
City-State-Zip: FT LAUDERDALE FL 33304

Title CHAIRMAN
Name HOLMAN, MELINDA K
Address 244 EAST KINGS HWY
City-State-Zip: MAPLE SHADE NJ 08052

Title CEO
Name ORTELL, CARL A
Address 244 EAST KINGS HWY
City-State-Zip: MAPLE SHADE NJ 08052

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

SIGNATURE: JASON WOODHAM

ASST SECRETARY

02/18/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name BATES, BRIAN R
Address 244 EAST KINGS HWY
City-State-Zip: MAPLE SHADE NJ 08052

Title VP
Name HURREN, CHRIS S
Address 244 EAST KINGS HWY
City-State-Zip: MAPLE SHADE NJ 08052

Title EVP
Name ODEN, LARRY K
Address 911 NE 2ND AVE
City-State-Zip: FORT LAUDERDALE FL 33304

Title EVP
Name BRANDT, PETER H
Address 911 NE 2ND AVE
City-State-Zip: FORT LAUDERDALE FL 33304

Title EVP
Name JUDGE, ANTHONY
Address 911 NE 2ND AVE
City-State-Zip: FORT LAUDERDALE FL 33304

Title TREASURER
Name HORWITH, BRIAN K
Address 244 EAST KINGS HWY
City-State-Zip: MAPLE SHADE FL 08052

Title ASST. SECRETARY, ASST.
TREASURER
Name RISPLER, ALLISON
Address 911 NE 2ND AVE
City-State-Zip: FORT LAUDERDALE FL 33304

Title EVP
Name SPARACINO, JOSEPH
Address 911 NE 2ND AVE
City-State-Zip: FORT LAUDERDALE FL 33304

Title EVP
Name LOISEAU, KENNETH J
Address 911 NE 2ND AVE
City-State-Zip: FORT LAUDERDALE FL 33304

Title EVP
Name DUECKER, JEFFREY S
Address 911 NE 2ND AVE
City-State-Zip: FORT LAUDERDALE FL 33304