

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K01994

**FILED**  
**Mar 19, 2014**  
**Secretary of State**  
**CC7384853670**

**Entity Name:** JERRY ULM DODGE, INC.

**Current Principal Place of Business:**

2966 N DALE MABRY  
TAMPA, FL 33607

**Current Mailing Address:**

JERRY ULM DODGE, INC.  
2966 N. DALE MABRY HWY  
TAMPA, FL 33607 US

**FEI Number:** 59-2855834

**Certificate of Status Desired:** No

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

DIVERS, BRETT DESQ.  
2966 N. DALE MABRY HWY  
C/O JERRY ULM DODGE, INC.  
TAMPA, FL 33607 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	PD	Title	SD
Name	ULM, GERALD HP	Name	ULM, CAROLYN JS
Address	2966 N DALE MABRY	Address	2966 N DALE MABRY
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33607
Title	T		
Name	ULM, VENA MT		
Address	2966 N. DALE MABRY HWY		
City-State-Zip:	TAMPA FL 33607		

*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:** GERALD H ULM

**PRESIDENT**

**03/19/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date