

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K35592

Entity Name: JM AUTO, INC.**Current Principal Place of Business:**5350 W. SAMPLE ROAD
MARGATE, FL 33073**Current Mailing Address:**5350 W. SAMPLE ROAD
MARGATE, FL 33073 US**FEI Number:** 65-0088515**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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	DIRECTOR
Name	BROWN, COLIN W.
Address	5350 W. SAMPLE ROAD
City-State-Zip:	MARGATE FL 33073
Title	DIRECTOR, PRESIDENT
Name	POLLOCK, CRAIG J
Address	5350 W. SAMPLE ROAD
City-State-Zip:	MARGATE FL 33073
Title	VP, GENERAL COUNSEL & SECRETARY
Name	CLARKE, TODD Q.
Address	5350 W. SAMPLE ROAD
City-State-Zip:	MARGATE FL 33073
Title	VP, CORPORATE TAXES
Name	MAGNER, KIMBERLY M.
Address	5350 W. SAMPLE ROAD
City-State-Zip:	MARGATE FL 33073

Title	DIRECTOR
Name	BURNS, BRENT D.
Address	5350 W. SAMPLE ROAD
City-State-Zip:	MARGATE FL 33073
Title	PRESIDENT
Name	SHEEHY, EDWARD M.
Address	5350 W. SAMPLE ROAD
City-State-Zip:	MARGATE FL 33073
Title	VP
Name	DUNN, JAMES P.
Address	5350 W. SAMPLE ROAD
City-State-Zip:	MARGATE FL 33073
Title	VP
Name	GUERRERO, JUAN C.
Address	5350 W. SAMPLE ROAD
City-State-Zip:	MARGATE FL 33073

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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: TODD Q. CLARKE**SECRETARY****04/25/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name GEBHARD, ERIC M.
Address 5350 W. SAMPLE ROAD
City-State-Zip: MARGATE FL 33073

Title ASSISTANT TREASURER
Name ROMANO, BRYAN
Address 5350 W. SAMPLE ROAD
City-State-Zip: MARGATE FL 33073

Title ASSISTANT SECRETARY
Name DANIELS, KIM
Address 5350 W. SAMPLE ROAD
City-State-Zip: MARGATE FL 33073

Title ASSISTANT TREASURER
Name BROWDY, ALAN J.
Address 5350 W. SAMPLE ROAD
City-State-Zip: MARGATE FL 33073

Title ASSISTANT SECRETARY
Name FARAONE, ROSE
Address 5350 W. SAMPLE ROAD
City-State-Zip: MARGATE FL 33073

Title ASSISTANT SECRETARY
Name SHEPTAK, PETER J.
Address 5350 W. SAMPLE ROAD
City-State-Zip: MARGATE FL 33073