

**2015 NOT FOR PROFIT REGISTRATION ANNUAL REPORT**

DOCUMENT# C92000000007

**FILED**  
**Feb 04, 2015**  
**Secretary of State**  
**CC6748321141**

**Entity Name:** FORD DEALERS ADVERTISING FUND, INC., JACKSONVILLE DIVISION

**Current Principal Place of Business:**

2821 HARLEY COURT  
SUITE 300  
COLUMBUS, GA 31909

**Current Mailing Address:**

2821 HARLEY COURT  
SUITE 300  
COLUMBUS, GA 31909 US

**FEI Number: 59-0965458**

**Certificate of Status Desired: No**

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

SMITH, HULSEY & BUSEY  
1800 FIRST UNION BANK TOWER  
225 WATER STREET  
JACKSONVILLE, FL 32201 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  
Name REID, RUSSELL  
Address PO BOX 940005  
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR  
Name CLARK, PAUL  
Address 464046 STATE ROAD 200  
City-State-Zip: YULEE FL 32097

Title DIRECTOR  
Name MULLINAX, JERRY  
Address PO BOX 4400  
City-State-Zip: APOPKA FL 32703

Title DIRECTOR  
Name WALKER, FRANK  
Address 17556 U.S. HWY. 19 NORTH  
City-State-Zip: CLEARWATER FL 34624

Title DIRECTOR  
Name BALL, KEN  
Address US HWY 27 SOUTH  
City-State-Zip: HAVANA FL 32333

Title SECRETARY, TREASURER  
Name LARRY, MULLINAX  
Address 1307 NORTH DIXIE HWY  
City-State-Zip: NEW SMYRNA BEACH FL 32170

Title DIRECTOR  
Name BUCKINGHAM, BILL  
Address 9650 ATLANTIC BLVD  
City-State-Zip: JACKSONVILLE FL 32225

Title DIRECTOR  
Name EVERETT, STEVE  
Address 215 W MAGNOLIA AVENUE  
City-State-Zip: VALDOSTA GA 31603

**Continues on page 2**

*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: RUSSELL REID**

**CHAIRMAN**

**02/04/2015**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name JARRETT, BRIAN  
Address 3015 LAKE ALFRED ROAD  
City-State-Zip: WINTER HAVEN FL 33881

Title DIRECTOR  
Name KISSELBECK, BOBBY  
Address 1118 13TH STREET  
City-State-Zip: ST CLOUD FL 34769

Title DIRECTOR  
Name PEACH, CHIP  
Address 202 HWY 31 SOUTH  
City-State-Zip: BREWTON AL 36426

Title DIRECTOR  
Name WAITCUS, GREG  
Address 16330 US HWY 441 NORTH  
City-State-Zip: ALACHUA FL 32615

Title DIRECTOR  
Name SCOTT, JIM  
Address 2000 E. BAKER STREET  
City-State-Zip: PLANT CITY FL 33566

Title DIRECTOR  
Name KING, LEE  
Address 3565 COMMUNITY ROAD  
City-State-Zip: BRUNSWICK GA 31520

Title DIRECTOR  
Name MARTIN, CLIFF  
Address 38300 DICK JARRETT WAY  
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR  
Name ROBLES, BENNY  
Address 2800 U.S. HWY 98 NORTH  
City-State-Zip: BARTOW FL 33830

Title DIRECTOR  
Name WEIKERT, PHILIP  
Address 21399 HWY 27  
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR  
Name BARON, CHRIS  
Address 1810 E BRONSON HWY  
City-State-Zip: KISSIMMEE FL 34742