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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name

157236

SCHUMACHER BUICK-OLDSMOBILE, INC.

(1)

FILED May 01 1996 8:00 am Secretary of State

Principal Place of 3031 OKEEC PO BOX 262	HOBEE BLVD		Mailing Address 3031 OKEECHOBEE BLVD PO BOX 2620				 	 	i 010/1 04 1 41 (01)	
WEST PALM BEACH FL 33402			WEST PALM BEACH FL 33402			3. Date incorporated or Qualified 02/18/1949	pated or Qualified 3a. Date of Last Report 01/19/1995			
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23			2a. Mailing Address 26 Suite, Apt #, etc 27 City & State 28			 -	4. FET Number 59-0593470	Ang		Applied For
							5. Certificate of Status Desired	×		Additional Required
		28					6. Election Campaign Financing Trust Furid Contribution \$5.00 May Be Added to Fees			
Z(p 24	Country 25	29	Zip	30 Cour	ntry			No No		199.032,
	9. Name and Address of Current	t Regist	ered Agent		04		10. Name and Address of New F	Registered	Agent	
SCHIIM	IACHER RICHARD F				81	Name				
SCHUMACHER,RICHARD E 3031 OKEECHOBEE BLVD			82 Street Ad		iress (P.O. Box Number is Not Acceptal	ole)				
WEST F	PALM BEACH FL 33401		83							
					84	Crty		FL	85 Zıç	Code
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	Signature, typed or printer traine of respolered agent.	accide ta	हुनुनेटलाकः — — — — — — — — — — — — — — — — — — —	uli Bayasei	A ₁ · t	Saghad ato to sak	est where the statem	DA'1		
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roomerby certify that the information suppreciously this iting is vournianly turnished and cases not quality for the exemption started in Section 1.9.07(5)(k), Florida Statutes. I further certify that the information indicated on this acrual report or supplier ental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 12 or Block 13 if changed, or on an attachment with an andress

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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