2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2009
Secretary of State

DOCUMENT# 217784

Entity Name: DUVAL MOTORCARS OF GAINESVILLE, INC.

Current Principal Place of Business:

701 RIVERSIDE PARK PLACE
SUITE 310
JACKSONVILLE, FL 32204 US

New Principal Place of Business:

3525 NW 95TH BOULEVARD
GAINESVILLE, FL 33606 US

Current Mailing Address:

701 RIVERSIDE PARK PLACE
SUITE 310
JACKSONVILLE, FL 32204 US

New Mailing Address:

FEI Number: 59-6077952 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WIKER, PAMELA L
701 RIVERSIDE PARK PL ACE
SUITE 310
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: C/D ( ) Delete
Name: GRAHAM, HENRY H JR
Address: 701 RIVERSIDE PARK PLACE, SUITE 310
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: P/D ( ) Delete
Name: HODGES, DAVID C JR.
Address: 701 RIVERSIDE PARK PLACE, SUITE 310
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: S/D ( ) Delete
Name: MATHENY, LAWRENCE M JR
Address: 701 RIVERSIDE PARK PLACE, SUITE 310
City-St-Zip: JACKSONVILLE, FL 322043343 US

Title: V/D ( ) Delete
Name: LONG, WILLIAM A
Address: 11000 NORTH FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33612 US

Title: T/D (X) Delete
Name: CURRY, JEFFERY S
Address: 701 RIVERSIDE PARK PLACE, SUITE 310
City-St-Zip: JACKSONVILLE, FL 322043343 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ST/D (X) Change ( ) Addition
Name: CURRY, JEFFERY S
Address: 701 RIVERSIDE PARK PLACE, SUITE 310
City-St-Zip: JACKSONVILLE, FL 322043343 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HENRY H. GRAHAM, JR. CD 03/17/2009
Electronic Signature of Signing Officer or Director Date