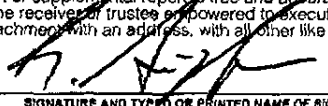


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2006 08:00 AM
Secretary of State

DOCUMENT # 279738		
1. Entity Name MCCOTTER FORD, INC.		
Principal Place of Business 3000 CHENEY HIGHWAY TITUSVILLE FLA, 32780 US		Mailing Address P O BOX 5729 TITUSVILLE, FL 32783 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MCCOTTER, C.R. III 3000 CHENEY HIGHWAY TITUSVILLE, FL 32780		02142006 No Chg-P CR2E034 (11/05)
		4. FEI Number 59-1110011
8. 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. I am familiar with, and accept the obligations of registered agent.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
		DO NOT WRITE IN THIS SPACE
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST MCCOTTER III, C R 3000 CHENEY HIGHWAY TITUSVILLE, FL 32780	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JOHNSON, R. SCOTT 3000 CHENEY HWY TITUSVILLE, FL 32780	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	U00000443814 03/06/06-20026-020 150.00 DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  R. Scott Johnson 2-17-06 321-267-2112		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		