FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00



PROFIT CORPORATION ANNUAL REPORT 1997	FLORIDA DEPART Sandra B. Secretary DIVISION OF C	Mortham / of State	Mar 14 1997 8:00am Secretary of State	
DOCUMENT # 296917 COOK-WHITEHEAD FORD, INC.	(8)			
Principal Place of Business P.O. BOX 351 PANAMA CITY FL 32402-0351	Maining Address P.O. BOX 351 PANAMA CITY FL 32402-03	51		IBH DIDH BIDH 1101 BIDH BIDH SIDH
			3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Place of Business	28. Mailing Address		09/20/1965 4. FÉL Number .	04/29/1996 Applied For
21 Suite Apt # 619	Suite, Apt. #, etc.		NOT APPLICABLE	Not Applicable
Suite, Apt. #, etc.	27 Solid, April #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country	28 Zip	Country	Trust Fund Contribution 8. This corporation has liability for interest.	Added to Fees angible tax under s. 199.032
2425	29	30	Florida Statutes	Yes No
9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Regi	
WHITEHAED, CHARLES A. 730 W. 15TH ST.		W.	HITEHEAD, CHARLES css (P.O. Box Number is Not Acceptable	
PANAMA CITY FL 32401			555 (F.O. DOX NUMBER IS NOT NOCEPTABLE	
		83		
1		84 City		FL 85 Zip Code
Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State or agent. I am familiar with, and accept the obligations SIGNATURE Signature, typical or posted name of register or are state. Of LICERS AND.	ons of, Section 607 0505, Flor another mapheable (ISOTE	Ithorized by the corporati ida Statutos. Beoscied Agen signatura require 13.		DATE RS AND DIRECTORS IN 12
NAME WHITEHEAD, C. A.	∟ DEL€1€	1.1 FILLE 1.2 NAME		Change Addition
STREET ADDRESS 730 W. 15TH STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP PANAMA CITY FL		1.4 CiTY+ \$1 - 7iP		
NAME WHITEHEAD.C.A.	LLI DELETE	21 TRUE 22 NAME		Change Addition
NAME WHITEHEAD,C.A. STREET ADDRESS 730 W. 15TH ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP PANAMA CITY FL		2. 4 CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE	[_] DELETE	3.1 31116		Change Addition
NAME STREET ADDRESS		3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. C/1Y-S1-ZIP		
TITLE NAME	L DELETE	4 1 113LE 4. 2 NAMI		Change Addition
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CHY- S1-ZIP		
TITLE	₹_3 DLUETE	5.1 TITLE		Change Addition
NAME STREET ADDRESS		5.2 NAME 5.3 STREET ADDRESS		
CITY-\$T-ZIP	· · · · · · · · · · · · · · · · · · ·	5.4 CITY-ST - ZIP		
TITLE	☐ DELĒTE	6.1 TITUE 6.2 NAME		Change Addition
NAME STREET ADDRESS		6.3 STREET ADDRESS		
CITY-\$1-ZIP		6.4 C(TY+S1+7(P		
14. I do hereby certify that the information supplied information indicated on this annual report or suplam an officer or director of the corporation or it appears in Block 12 or Block 13 if changed, or c	oplemental annual report is tru le receiver or trustee empore	Hor the exemption stated ue and accurate and that and to exemple this report	my signature shall have the same legal of as required by Chapter 607, Florida Sta	I further certify that the offect as if made under eath; that tutes; and that my name