

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 MAY 10 PM 2:10

DOCUMENT # 304914 (5)

1. Corporation Name

LUKE POTTER DODGE, INC.



Principal Place of Business

1127 N ORLANDO AVE
WINTER PARK FL 32789
US

Mailing Address

1127 N ORLANDO AVE
WINTER PARK F 32789
US

3. Date Incorporated or Qualified
05/09/1966

3a. Date of Last Report
07/11/1995

2. Principal Place of Business

21 12201 W. COLONIAL DR
Suite, Apt. #, etc.

2a. Mailing Address

26 12201 W. COLONIAL DR
Suite, Apt. #, etc.

22 City & State

23 WINTER GARDEN, FL

27 City & State

28 WINTER GARDEN, FL

24 Zip

34787

25 Country

US

29 Zip

34787

30 Country

US

4. FEI Number
59-1149666

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

POTTER, MICHAEL L
6380 BRENDA DR
APOPKA FL 32703

10. Name and Address of New Registered Agent

81 Name

MICHAEL L. POTTER

82 Street Address (P.O. Box Number is Not Acceptable)

1143 BRANTLEY ESTATES DR

83

84 City

ALTAMONTE SPRINGS

FL

85 Zip Code

32714

11. Pursuant to the provisions of Sections 607.002 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Michael L. Potter

MICHAEL L. POTTER

5-8-96

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	POTTER, MICHAEL L	
STREET ADDRESS	6380 BRENDA DR	
CITY-ST-ZIP	APOPKA FL	
TITLE	VP	☐ DELETE
NAME	SCHROTH, CRAIG N	
STREET ADDRESS	5635 CATSKILL CT	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	ST	☒ DELETE
NAME	POTTER, LUTHER D	
STREET ADDRESS	224 LIVE POAK LANE	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
TITLE	D	☐ DELETE
NAME	PEMBERTON, SARAH E	
STREET ADDRESS	830 12TH AVE	
CITY-ST-ZIP	NEW SMYRNA BCH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☒ Change ☐ Addition
1.2 NAME	MICHAEL L. POTTER	
1.3 STREET ADDRESS	1143 BRANTLEY ESTATES DR.	
1.4 CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32714	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	ST	☒ Change ☐ Addition
4.2 NAME	SARAH E. PEMBERTON	
4.3 STREET ADDRESS	830 12TH AVE	
4.4 CITY-ST-ZIP	NEW SMYRNA BEACH, FL	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 of this document or in an attachment with an address.

SIGNATURE:

Michael L. Potter

MICHAEL L. POTTER

5-8-96

(407) 841-8558

CR2E034 (12/95)