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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90080 024 \*\*\*150.00

DOCUMENT #	245200
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4. Camoratian Nama	

JON HALL CHEVROLET, INC.

Principal Place of Business Mailing Address					II BIBN WINI BIBN O	IBN 84811 1883	
551 N NOVA RD. 551 N NOVA RD.							
P. O. BOX 751		P. O. BOX 751	•		DO NOT WRITE IN TH	IIS SPACE	
DAYTONA BEACH FL 32114-1701 DAYTONA BEACH FL 32114-17		701		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed			
		· <del></del> •	_		04/28/1969		
2 Principal Pl	ace of Business	2a, Mailing Address			4. FEI Number	- An	plied For
<b>-</b> ¬ '	ace of Equinoss	26			59-0872949	<del>}</del>	t Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				\$8.75	
22		27			5. Certifcate of Status Desired	Fee Re	equired
City & State	e	City & State			6. Election Campaign Financing	\$5.00	Mav Be
23		28			Trust Fund Contribution	Added t	
Zip	Country	Zip	Country		8. This corporation owes the current year	Intangible	
24	25	29 30	}		Personal Property Tax.	Yes	□No
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Register	ad Agent	
			81	Name			}
	Bousek, ted W.		82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
	n nova RD		192	Outdoorna		<u>-</u>	
DAYT	ONA BEACH FL 32114		83				
			94	Cit		. 85 Zip (	Code
			84	City	F	:L   "   2"	Code
office or re	egistered agent, or both, in the Sta	te of Florida. Such change was auth- igations of, Section 607.0505, Florida	orized by Statutes	the corpora	rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap	pointment as re	gistered
12.	_ <del></del>	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	RITCHEY, GLENN S.		1.2 NAME	{			i
STREET ADDRESS	551 N. NOVA ROAD		1.3 STREE	TADDRESS			ļ
CITY-ST-ZIP	DAYTONA BEACH FL		1.4 CITY-S	T-ZIP			
TITLE	TSD	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	SERBOUSEK, T.W.		2.2 NAME				ĺ
STREET ADDRESS	551 N. NOVA ROAD		2.3 STREE	T ADDRESS			{
CITY-ST-ZIP	DAYTONA BEACH FL		2. 4 CITY- S	ST-ZIP			
TITLE	DC	☐ DELETE	3.1 TITLE			Change	Addition
NAME	HALL, JON E.		3.2 NAME				l
STREET ADDRESS	551 N. NOVA ROAD		3.3 STREE	ADDRESS			1
CITY-ST-ZIP	DAYTONA BEACH FL		3.4. CITY-5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4.2 NAME				1
STREET ADDRESS		·	4.3 STREE	FADDRESS	د المعالية المعالم الم	⇒ = ° + · · ·	
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE	_		Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	FADDRESS			l
CITY-ST-ZIP			54 CITY-S	T- ZIP			]
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	TADDRESS	•		- 1
CITY-ST-ZIP	·		6.4 CITY-S	T- ZIP			_ }
	sertify that the information supplied	with this filing does not qualify for the	e exempt	ion stated in	Section 119.07(3)(i), Florida Statutes, I further	certify that the i	nformation

4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i). 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 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 chapter 60, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Suy JT 4444

Dayline Phone #