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

**PROFIT CORPORATION** ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

**BOB TAYLOR CHEVROLET, INC.** 

**FILED** Apr 02 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					n indicas cisas design sonto secto soti pròti espet albus dibit dibit dibit dibit.				
5685 N. AIRPO		PO BOX 11899							
P.O. BOX 1977 (33939) NAPLES FL 33939		NAPLES FL 34101 US							
						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			ĺ
						09/26/1969	<u>.</u>	,	
	lace of Business	2a. Mailing Address				4. FEI Number		-	plied For
21		26				59-1271117			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	□ <b>\$</b>		Additional
22		27			<del></del>		<del></del>	Fee Re	· <del></del>
City & State	е	City & State				6. Election Campaign Financing		\$5.00	
23 Zip	Country	28	Coun	t= .				Added 1	
	IIΛ <b>a</b> ⊢¬ '	Zip		ır y		8. This corporation owes or has paid	-		angible ] No
24 34	9. Name and Address of Curre		30			Personal Property Tax due June 3  10. Name and Address of New Reg			] NO
=	<del></del>	ilit Walistolen Wasiir		31 N	Vame	10. Name and Address of New Heg	ISIOI OU AGO	· · ·	
	/LOR, R. M.		`						
	15 N. AIRPORT RD.		8	32	Street Addr	ess (P.O. Box Number is Not Acceptable	<del>)</del>		
NA	PLES FL 33942		ļ.,						
			*	33					
			Ē	14 (	City		8	5 Zig	Code_ o
							FL	, J	
11. Pursuant I	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute e of Florida, Such change was a	es, the about	by th	amed corp	oration submits this statement for the purion's board of directors. I hereby accept	rpose of cha	anging it se toem	s registered
agent. I a	m familiar with, and accept the oblig	gations of Section 607.0505, Flo	rida Statu	les.	io corporati	ion a sound of an extense. This easy accordi	по арропп		,cg.0.0700
SIGNATURE									
	Signature, typed or printed name of registered a			Agent s	signálure requir	ed when reinstating)	DATE		
12.		ND DIRECTORS	13.		<del></del>	ADDITIONS/CHANGES TO OFFICE			
TITLE	PD DELETE			1.1 TITLE			Ц	Change	Addition
NAME	TAYLOR, R. M.			1.2 NAME					
STREET ADDRESS	5665 N AIRPORT ROAD		1.3 STREET ADDRESS		DRESS	•			1
CITY-ST-ZIP	NAPLES FL			1.4 CITY-ST-ZIP					<del></del>
TITLE	VD			2.1 TITLE			Ц	Change	Addition
NAME	TAYLOR, S. A.		2.2 NAM	2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS	5665 N AIRPORT ROAD		2.3 STR						
CITY-ST-ZIP	NAPLES FL		2.4 CIT	Y-ST-	ZIP				
TATLE		☐ DELETE	10 1		}		$\sqcup$	Change	Addition
NAME			3.2 NAM	1E	l				
STREET ADDRESS			3.3 STR	EET AD	DRESS				ŀ
CITY-ST-ZIP		· <u></u>	3.4. CITY		ŽIP				-
TITLE		☐ DELETE	4.1 TITL	E			Ш	Change	☐ Addition
NAME			4. 2 NAN	ΜE					i
STREET ADDRESS			4.3 STRE	EET ADI	DAESS				
CITY-ST-ZIP			4.4 CITY	·ST-Z	tP				
TITLE		☐ DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAM	ΙE					
STREET ADDRESS			5.3 STRE	ET AD	DRESS				
CITY-ST-ZIP			5.4 CITY	-ST-Z	IP				
TITLE		☐ DELETE	6.1 TITL	Ę				Change	Addition
NAME			6.2 NAM	1E	1				
STREET ADDRESS			6.3 STRE	EET ADI	DRESS				
CITY-ST-ZIP			6.4 CITY		ŀ		•		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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 oath; that I am an officer or director of the corporation or the receiver or trustee empoward to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

941-591-0991