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

PROFIT Mar 06 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 369375 (1) HILL OLDSMOBILE - NISSAN, INC. Mailing Address Principal Place of Business 401 SIXTH ST S W 401 SIXTH ST S W WINTER HAVEN FL 33880 WINTER HAVEN FL 33880 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/04/1970 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 21 59-1301512 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 5. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zic Country Žipi Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 30 Personal Property Tax due June 30. ∏ No 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HILL JR., JAMES W. 1000 ISLAND WAY Street Address (P.O. Box Number is Not Acceptable) 82 WINTER HAVEN FL 33881 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.050? 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TITLE 1.1 TITLE Change NAME HILL, SHIRLEY B. 1.2 NAME 1000 ISLAND WAY STREET ADDRESS 1.3 STREET ADDRESS WINTER HAVEN, FL 00000 CITY-ST-ZIP 1.4 CiTY-ST-ZiP DELETE TITLE 2.1 TITLE Change Addition NAME HILL, JR JAMES 2.2 NAME STREET ADDRESS 1000 ISLAND WAY 2.3 STREET ADDRESS WINTER HAVEN, FL 00000 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE HILL, TIMOTHY J NAME 3.2 NAME 310 LOCHON CIR SE STREET ADDRESS 3 3 STREET ADDRESS WINTER HAVEN FL CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE ☐ Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City-St-ZiP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - 2IP

W. Hill, JR D2.26-98 (941) 299.2161

14. 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 shell 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 it changed, or the receiver 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 it changed, or the receiver 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

CITY - ST- ZIP

SIGNATURE

FILED