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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 3

373381

(3)

SOUTH LAKE FORD, INC.

Mailing Address

FILED May 01 1996 8:00 am Secretary of State

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Principal Mace	O Business	Mailing Address							
1101 E. HV Clermont	VY 50 FL 34711-3250		7920*** E*54712**						
						3. Date Incorporated or Qualified 12/01/1970	<b>3a</b> . Da	ote of Last F 05/01/1	
2. Principal Pl	ace of Business	2a. Mailing Addre	ess		^	4. FEI Number			Applied For
21		26 200 S	etc.	90	Hve.	59-1312554			Not Applicable
Suite, Apt.	#, etc.	Suite Apt. #,		J 20_		5. Certificate of Status Desired		<b>*</b>	5 Additional Required
City & State	e	City & State	indos 1	FL		Election Campaign Financing     Trust Fund Contribution		Add	May Be ed to Fees
Zip 24	Country <b>25</b>	<sup>Zip</sup> 29 <b>3280/-3</b>	3432 30°	Country			s 🔲 No		199.032,
	<ol><li>Name and Address of</li></ol>	Current Registered Agent				10. Name and Address of New	Registere	d Agent	
				81	Name				
A.G.C.				82	Street A	Address (P.O. Box Number is Not Accepta	ible)		
	OUTH ORANGE AVENUE			92					
	SUN BANK CENTER			83					
	NDO FL 32801			84	City		F	L   [	ip Code
11. Pursuant	to the provisions of Sections 6	07.0502 and 607.1508, Florida	a Statutes, the a	above r	named cor	rporation submits this statement for the poporation submits this statement for the ap	urpose of c	changing its	registered offici
or registe	red agent, or both, in the State	e of Fiorida. Such change was a	authorized by th	ie corp	oration's c	poard of directors. Thereby accept the ap-	pomment	as registere	o agent. I am
familiar w	ith, and accept the obligations	of, Section 607.0505, Florida S	Statutes.						
familiar w	ith, and accept the obligations	of, Section 607.0505, Florida S	Statutes.						
familiar w SIGNATURE	Signarure, typed or printed name of regis	of, Section 607.0505, Florida S	Statutes. (NOTE: Registe		it signature rec	iquired when reinstaling)	DATE	UD DIDEOT	000 IN 10
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes: I further certify that the informatior indicated on this annual report as 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/96

352-394-6/6/5 P