

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 380114 (9)

1. Corporation Name

PALATKA FORD-MERCURY, INC.



Principal Place of Business

Mailing Address

**420 NORTH PALM AVENUE
BOX 831
PALATKA FL 32177-2508**

**420 NORTH PALM AVENUE
BOX 831
PALATKA FL 32177-2508**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

04/08/1971

3a. Date of Last Report

01/24/1995

4. FEI Number

59-1319042

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

10. Name and Address of New Registered Agent

**BREGAN, L.A. JR.
420 NORTH PALM AVENUE
PALATKA FL 32077**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 of the person who is authorized to sign this statement on behalf of the corporation.

(Print Name of Agent) Signature required when registering.

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
	PD			☐
	BREGAN, L.A., JR			☐
	RT 1,			☐
	ST AUGUSTINE FL			☐
	STD			☐
	COCCO, ANTHONY C			☐
	REDBUD LANE			☐
	PALATKA FL			☐
	V			☐
	SILCOX, MERLE W			☐
	2701 LANE ST			☐
	PALATKA FL			☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE	Change	Addition
11				☐	☐	☐
12				☐	☐	☐
13				☐	☐	☐
14				☐	☐	☐
15				☐	☐	☐
16				☐	☐	☐
17				☐	☐	☐
18				☐	☐	☐
19				☐	☐	☐
20				☐	☐	☐
21				☐	☐	☐
22				☐	☐	☐
23				☐	☐	☐
24				☐	☐	☐
25				☐	☐	☐
26				☐	☐	☐
27				☐	☐	☐
28				☐	☐	☐
29				☐	☐	☐
30				☐	☐	☐

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 information indicated in 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 or is contained on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A. C. Cocco

01/19/96

904 328-8881

DAY

DAYTIME PHONE #

CR2E034 (12/95)