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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 387520

(0)

TRIANGLE CHEVROLET-BUICK-OLDS, INC.

Principal Place of Business Mailing Address 7TH ST. & NELSON AVE 7TH ST. & NELSON AVE P.O. BOX 1456 P.O. BOX 1456 **DEFUNIAK SPRINGS FL 32433** DEFUNIAK SPRINGS FL 32435-7456 3. Date Incorporated or Qualified 3a. Date of Last Report 08/25/1971 03/04/1996 2. Principal Place of Business 2a. Mailing Address Applied For 59-1357594 21 26 Not Applicable Suite. Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes Yes No 25 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name LATHINGHOUSE, R.G. INDIAN CREEK ROAD Street Address (P.O. Box Number is Not Acceptable) DEFUNIAK SPRINGS FL 32433 83 RA City Zip Code 11. Pursuant to the provisions of Sections 607.0502 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or profed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12 DELETE 1.1 TITLE Change Addition TITLE LATHINGHOUSE, T.L. 1.2 NAME NAMé 304 PLATEAU AVE 1.3 STREET ADDRESS STHEET ADDRESS DEFUNIAK SPRINGS FL 1.4 CITY - ST - ZIP C-TY - ST - ZiP DELETE Change Addition 2.1 TITLE THE WILLIAMS, C.H.JR. NAME 2.2 NAME **ROUTE 7** STREET ADDRESS 2.3 STREET ADDRESS DEFUNIAK SPRINGS FL 2.4 CITY-ST-ZIP CH7 - S1 - ZIP DELETE ☐ Change Addition 31 TITLE THEF LATHINGHOUSE.R.G. NAME 32 NAME INDIAN CREEK ROAD **3.3 STREET ADDRESS** STREET ADDRESS DEFUNIAK SPRINGS FL 3.4. CITY-ST-ZIP CHY-SI-7/P DELETE Change Addition Table 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. I do 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 peport 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 direction of the corporation or the receiver or truefee 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 open attachment with an address.

5.4 CITY-ST-ZIP.

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

CiTY-ST-ZIP

STREET ADDRESS

TITLE NAMÉ

TYPED OR PRINTED MANE OF SIGNING OF SIGN OR DIRECTOR

DELETE

77 94-312-2/5/
Date Daytime Phone •

FILED

Apr 25 1997 8:00am

Secretary of State

CR2E034 (9/96)

Addition

Change