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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 30 1997 8:00am

Secretary of State

407-724-6611

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 465526

(2)

SUNSHINE DODGE, INC.

SIGNATURE:

Principal Place of Business Mailing Address 840 S. HARBOR CITY BLVD. 840 S. HARBOR CITY BLVD. MELBOURNE FL 32901 MELBOURNE FL 32901-1907 3. Date Incorporated or Qualified 3a. Date of Last Report 11/26/1974 04/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1560401 21 26 Not Applicable Suite, Apt. #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Z_{10} Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes 🗶 Yes 🔲 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name STRANGE, JACK R 840 S HARBOR CITY BLVD 62 Street Address (P.O. Box Number is Not Acceptable) MELBOURNE FL 32901 63 84 City 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature Typed or printed name of rogistered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)PD TITLE DELETE ☐ Change Addition 1.1 TITLE JOSEPH, SALIM C NAME 12 NAME 840 S HARBOR CITY BLVD STREET ADDRESS 13 STREET ADDRESS MELBOURNE, FL 00000 CITY-ST-ZIP 1.4 CITY-ST-ZIP SD **X** DELETE 21 TITLE Addition TITLE Change NEALE, WILLIAM J NAME 22 NAME 840 S HARBOR CITY BLVD STREET ADDRESS 2.3 STREET ADDRESS MELBOURNE, FL 00000 CITY - ST - ZIP 2.4 CITY-ST-ZIP VD DELETE THILE 3.1 TITLE Change Addition JOSEPH, GEORGE C. NAME 32 NAME 840 S. HARBOR CITY BLVD. STREET ADDRESS 3.3 STREET ADDRESS MELBOURNE FL CITY - \$1 - ZIP 34. CITY-ST-ZIP VD DELETE TITLE 4.1 TITLE Change Addition JOSEPH, MARY M NAME 4.2 NAME 840 S. HARBOR CITY BLVD STREET ADDRESS 4.3 STREET ADDRESS MELBOURNE FL CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TOTAL 51 TITLE Change Addition STRANGE, JACK R NAME 5.2 NAME **840 S HARBOR CITY BLVD** STREET ADDRESS 53 STREET ADDRESS MELBOURNE FL CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change TITLE 6 1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - Z(P 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not gualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this angular 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 of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed or partial and the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the receiver

WANY JACK R. STRANGE/SECRETARY