

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

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 APR -6 PM 4:08

**DOCUMENT # 479302 (2)**

1. Corporation Name

**QUALITY PONTIAC-GMC TRUCK, INC.**

Principal Place of Business

**1825 WEST HIGHWAY 520  
COCOA FL 32926**

Mailing Address

**1825 WEST HIGHWAY 520  
COCOA FL 32926**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

**06/19/1975**

3a. Date of Last Report

**03/24/1994**

4. FEI Number

**59-1606287**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**GAY, FREDDY D.  
FOREST HILL DRIVE  
COCOA FL 32926**

10. Name and Address of New Registered Agent

81 Name

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

**1390 WALTON HEATH CT.**

83

**ROCKLEDGE, FL 32955**

84 City

**ROCKLEDGE**

**FL**

85 Zip Code

**32955**

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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**GAY, FREDDY D.  
3216 FOREST HILL DR  
COCOA FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**S  
MARR, JOYCE B.  
4155 PEPPERTREE ST.  
COCOA FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**D  
HOUSER, WESLEY  
1005 CARRIGAN AVE  
MERRITT ISLAND FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

**1390 WALTON HEATH CT.  
ROCKLEDGE, FL 32955**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☒ Change ☐ Addition

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☐ Change ☐ Addition

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 110.07(3)(k), 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 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]*

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**407-633-9300**

Date

Signature