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

CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 489925

(8)

FILED Mar 26 1998 8:00am Secretary of State

STEVE	MOORE CHEVROLET, INC.	4			
Principal Place of Business Mailing Address					ADIA BABAI DIBII DIDII DIDII 1001
5757 LAKE WORTH ROAD P.O. BOX 9500 GREENACRES FL 33463		5757 LAKE WORTH ROAD P.O. BOX 9500 GREENACRES FL 33466-9500		DO NOT WRITE IN TH 3. Date Incorporated or Qualified	IS SPACE
				11/12/1975	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1632181	Not Applicable
Suite, Apt	#. etc	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer	1	100	10. Name and Address of New Registers	
C 1	T CORPORATION SYSTEM		B1 Name		
1200 SOUTH PINE ISLAND ROAD			82 Street	Address (D.O. Berriklumber in Alex Accordable)	
	ANTATION FL 33324		82 Street	Address (P.O. Box Number is Not Acceptable)	
, ,	21171101112 00024		83		
1			84 City	-	85 Zip Code
11. Pursuant	to the provisions of Sections 607 050	02 and 607.1508. Florida Sta	tutes, the above-named	d corporation submits this statement for the purpose	e of changing its registered
office or r	registered agent, or both, in the State	e of Florida. Such change wa	s authorized by the cor	rporation's board of directors. I hereby accept the a	appointment as registered
1	ani familiar with, and accept the oblig	gations of, Section 607.0505,	Florida Statutes.		
SIGNATURE	Signature, typed or printed name of registered ag-	ord and title if applicable (N	IOTE: Registered Agent signature	e required when reinstaling) DATE	E
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	MOORE, STEPHEN C.		1.2 NAME		
STREET ADDRESS	5757 LAKE WORTH ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	GREENACRES FL		1.4 CITY-ST-ZIP		
TITLE	ST	DELETE	21 TITLE	VICE PRESIDENT	Change Addition
NAME	MOORE, CATHERINE A.		2.2 NAME	JAMES O. COLE	
STREET ADDRESS	5757 LAKE WORTH ROAD		2.3 STREET ADDRESS	5757 LAKE WORTH ROAD	
CITY-ST-ZIP	GREENACRES FL		2. 4 CITY - ST - ZIP	GREGNACIES, FL 32463	
TITLE		DELETE	3.1 TITLE	S SEENALUES, FC 35470	Change Addition
NAME			3.2 NAME	JAMES O. COLE	
STREET ADDRESS			3.3 STREET ADDRESS	5757 LAKE WORTH POAD	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	GREENACRES, FL 33463	
TITLE		DELETE	4.1 TITLE	T 33703	Change Addition
NAME			4 2 NAME	Francis //vir	_ •
			4.3 STREET ADDRESS	KATHLEEN HYLE 5757 LAKE WONTH ROAD	
STREET ADDRESS					
CITY+ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	GABENACRES, FL 33463	Change Addition
ſ				PHORLES V. BAISDEN	C Oligina ER Vacificia
NAME			5.2 NAME	5757 LAKE WORTH ROAD	
STREET ADDRESS			5.3 STREET ADDRESS	GREENACRES FL 33463	
CITY-ST-ZIP		DELEVE	5 4 CITY-ST-ZIP	3-0403	Change
TITLE		☐ DELETE	6.1 TITLE	1	Change Addition
NAME	}		6.2 NAME	}	
STREET ADDRESS	!		6.3 STREET ADDRESS		

14. Thereby certify that the information supplied with this filling 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 suppliemental 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 chapted, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

ASSIGNATURE:

ASSIGNATURE

6.4 CITY-ST-ZIP