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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jun 07 1996 8:00 am
Secretary of State

DOCUMENT # 503820 (3)

1. Corporation Name

HIGGINBOTHAM CHEVROLET-OLDSMOBILE, INC.



Principal Place of Business

Mailing Address

1919 NORTH DIXIE FREEWAY
P. O. BOX 338
NEW SMYRNA BEACH FL 32168-5919

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P. O. BOX 338
NEW SMYRNA BEACH FL 32168-5919

3. Date Incorporated or Qualified

05/24/1976

3a. Date of Last Report

04/24/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALSH, DAVID J
432 S. BEACH ST.
DAYTONA BEACH FL 32114

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 607.1508, 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 of officer or director of registered agent or the corporation

Signature of Registered Agent (must be printed and dated)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

ST
HIGGINBOTHAM-MOODY, TRUDY
PO BOX 770
NEW SMYRNA BEACH FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DP
HIGGINBOTHAM, DENNIS D
451 N. NOVA ROAD
DAYTONA BEACH FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VP
HILL, LARRY E
451 N NOVA RD
DAYTONA BCH FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

☐ 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 119.07(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:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

6-4-96

904-427-1444

CR2E034 (12/95)