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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

521000

(0)

NORMAN BROTHERS NISSAN, INC.

Principal Place of Business Maling Address						11000 BAIO IRRA IIDH DRAA BOAN OOL BARK DIRA GIDH DIDH DIRA DIRA BIDIR ADB			
1983 N. SEMORAN BOULEVARD ORLANDO FL 32907			% ROOKS, MARVIN E., ESO. 500 CROWN OAK CENTRE DR. LONGWOOD FL 32750						
		US				3. Date Incorporated or Qualified 12/27/1976	1	te of Last Report 01/24/1995	
2. Principal Place of Business 2a.			Mailing Address			4. FEI Number		Applied For	
21		26				59-1744501		Not Applicable	
Suite, Apt. #, etc. 27			Suite, Apt. #. etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & S	City & Stafe			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees	
Ζφ <b>24</b>	Country 25	Zip	30	Country		8. This corporation has liability for Florida Statutes	intang ble s \[ \] No	tax under s. 199.032,	
	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
				81					
ROOKS, MARVIN E. E MARVIN E. ROOKS, P.A. 500 CROWN OAK CENTRE DR. LONGWOOD FL 32750			<b>82</b> Stre			ress (P.O. Box Number is Not Accepta	ble)		
			83						
								· · · · · · · · · · · · · · · · · · ·	
LUNGN	1000 FE 32730			84	City		F	85 Zip Code	
or redistere	o the provisions of Sections 607.050 ad agent, or both, in the State of Flo n, and accept the obligations of, Se	erda. Such change.	was authorized b	ie above y the corp	named corpo noration's boa	ration submits this statement for the pure and of directors. I hereby accept the app	irpose of c pointment a	hanging its registered office as registered agent. I am	
SIGNATURE _	Signature it great or protest can be of regions. Here	el acultin facini abro	Perific B	grisoni Air	Ul Suprathate tengunte	് <b>ക്</b> ക് ക്രിക്ക് വിവി	CATE		
12.					<u> </u>	ADDITIONS/CHANGES TO OF	FICERS AN	ND DIRECTORS IN 12	
TITLE	Р	DELETE		1 1 THE				Change Addition	
NAME	NORMAN, GEORGE J.			1.2 NAME					
STREET ADDRESS	1983 N. SEMORAN BLVD.			1.3 STREE	F ADDRESS				
City-St-ZiP	ORLANDO FL 32807			14 CHY-SCZIP					
TITLE	ST		☐ DELEKE 2.1					☐ Change ☐ Addition	
NAME	NORMAN, JAMES G.		22						
STREET ADDRESS	1983 N. SEMORAN BLVD.			2.3 STR::E	LADDRESS				
CITY-St-ZIP	ORLANDO FL 32807			2.4 CITY -	S1 - ZIG				
TITLE	V		[] DELETE 31					☐ Change ☐ Addition	
NAME	NORMAN, FORREST A.			3.2 NAME					
STREET ADDRESS	1983 N. SEMORAN BLVD.			33 STREE	T ADDRESS				

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

JAMES G. NORMAN SECT/TRES

07-01-96

(407) 657-9500

3.4 CITY - ST. ZIP

4.3 SEREET ADDRESS

5 3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY - ST - ZiP

4.4 City St-ZiP

4 1 TiTLE

4.2 NAME

5 1 TITLE

52 NAME

6 1 THTLE

6.2 NAME

SIGNATURE;

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-Z-P

CITY - ST - ZIP

TITLE

NAME

TITLE

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ORLANDO FL 32807

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