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

**PROFIT** CORPORATION ANNUAL REPORT

1996

CLASSIC CAR CO.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT** #

553372

**FILED** May 01 1996 8:00 am Secretary of State

|--|--|

	·				!	IB 1806 BIBS BIBS DIBI BIBS BIBS BIBS BIBS BIBS
Principal Place	of Business	Mailing Address				
4000 W. COLONIAL DR ORLANDO FL 32808-7923		4000 W. COLONIAL D ORLANDO FL 32808-7			•	
					3. Date Incorporated or Qualified 11/30/1977	3a. Date of Last Report 05/01/1995
2. Principal Pla	ace of Business	2a. Mailing Address	7		4. FEI Number	Applied For
21		26 PO BOX 1720		<b>59-1791199</b> Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State		City & State 28 WINTER PARK, FL		Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees	
Zip	Country	32790	Country	1	8. This corporation has liability for in	
24	[25]		30		Florida Statutes X Yes	
	g, Name and Address of Curren	it Registered Agent	81	Name	10. Name and Address of New Re	gistered Agent
HOMED BOOKED MA HI			61			
	:R, ROGER, W. III V. COLONIAL DR.		82	Street Addr	ess (P.O. Box Number is Not Acceptable	e)
	NDO FL 32803-4816		83	ļ		
01.00	150 12 02000 1010		_			
			84	City		FL 85 Zip Code
or registere	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric h, and accept the obligations of, Sect	da. Such change was authorize	s, the above- d by the corp	named corpor loration's boar	ration submits this statement for the purp rd of directors. I hereby accept the appo	oose of changing its registered office introduced introduced introduced agent. I am
	Signature typed or printed name of registered agent			nt signature requirer		DATE
TITLE	OFFICERS AN	D DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFI	DERS AND DIRECTORS IN 12  Change Addition
	HOLLER, ROGER W. JR	ביו מבנבוב	1 1 THILE		·	
"NAME	860 W FAIRBANKS		1.2 NAME	I ADDRESS		
STREET ADDRESS	WINTER PARK FL			I AODRESS		
CITY-ST-ZIP TITLE	V	DELETE	1.4 CITY - ST - ZIP 2. 1 TITLE			Change Addition
NAME	HOLLER, ROGER W. III		2.2 NAME			
STREET ADDRESS	860 W FAIRBANKS			I ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		2 3 STREET ADDRESS 2 4 CITY - ST - ZIP			
TITLE	V	DELETE	3 171718	01 · 21		Change Addition
NAME	HOLLER, CHRISTOPHER A		3.2 NAME			
STREET ADDRESS	860 W FAIRBANKS		3.3 STREE	T ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		3.4 CITY -	ST-7IP		
TITLE	V	☐ DELETE	4. 1 TITLE			Change Addition
NAME	HOLLER, JULIETTE E		4.2 NAME	1	40000182	:22U4
STREET ADDRESS				į.		45 044
3	860 W FAIRBANKS		1	F ADDRESS	-05/15/96010	45011
CITY-ST-ZIF	860 W FAIRBANKS WINTER PARK FL		1	1	-05/15/96010 ***200.00	45011
CITY-ST-ZIP TITLE	WINTER PARK FL T	DELETE	4.3 STREE	1		45—-011 ☐ Change ☐ Addition
	WINTER PARK FL T HOLLER, JULIETTE A	DELETE	4.3 STREE 4.4 CITY-	1		45011
TITLE	WINTER PARK FL T HOLLER, JULIETTE A 860 W FAIRBANKS	DELETE	4.3 STREE 4.4 CITY - 5.1 TIYLE 5.2 NAME	1		45011
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WINTER PARK FL T HOLLER, JULIETTE A		4.3 STREE 4.4 CITY- 5. 1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-	ST-ZIP		45—-D11  Change Addition
TITLE NAME STREEI ADDRESS CITY-ST-ZIP TITLE	WINTER PARK FL T HOLLER, JULIETTE A 860 W FAIRBANKS	☐ DELETE	4.3 STREE 4.4 CITY- 5.1 TIYLE 5.2 NAME 5.3 STREE 5.4 CITY- 6.1 TITLE	ST-ZIP		45011
THILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	WINTER PARK FL T HOLLER, JULIETTE A 860 W FAIRBANKS		4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- 6.1 TITLE 6.2 NAME	ST-ZIP  I ADDRESS ST-ZIP		45—-D11  Change Addition
THILE NAME STREET ADDRESS CITY-ST-ZIP TITLE	WINTER PARK FL T HOLLER, JULIETTE A 860 W FAIRBANKS		4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- 6.1 TITLE 6.2 NAME	ST-ZIP  I ADDRESS ST-ZIP  T ADDRESS		45—-D11  Change Addition

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 logal 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 13 if changed, pron an attachment with an address.

**SIGNATURE:** 

Daytime Phone #