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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

Mailing Address

RED HOAGLAND PONTIAC-GMC, INC.

FILED Mar 06 1998 8:00am Secretary of State



5325 14TH STREE BRADENTON FL S			5325 14TH STREET WEST BRADENTON FL 34207-3307			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
. Principal Place		26	2a. Mailing Address			07/01/1980 4. FEI Number 64-0502811	Applied For Not Applicable		
Suite, Apt. #, e	c.	Suite, Apt. #	Suite, Apt. #, atc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	······································			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country 25	7(p Cour 29 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent HARRISON, G. JOSEPH NCNB BANK BLDG., 4TH FLOOR 1201 6TH AVENUE, WEST				81 82	Name Street Addr	10. Name and Address of New Registered Agent dress (P.O. Box Number is Not Acceptable)			
	NTON FL 34205			83 84	City	FI	85 Zip Code		
1. Pursuant to the office or regis	tered agent, or both, in the St	0502 and 607,1508, Flori late of Florida, Such char	ige was authorize	d by	named corp the corporat	poration submits this statement for the purpose coordinate of directors. I hereby accept the ap	changing its registered pointment as registered		

office or re agent. I ar	egistered agent, or both, in the State of Florid m familiar with, and accept the obligations of,	a. Such change was a Section 607.0505, Flo	authorized by the corpora orida Statutes.	ition's board of directors. I hereby accept	the appointment as	registered
SIGNATURE	Signature, typed or printed mane of registered agent and title it	anglicable (NOI)	E Registered Agent signature requi	ired when reinslating)	DATE	
12.	OFFICERS AND DIRECT		13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	S IN 12
TITLE	PD	DELETE	1.1 TITLE		Change	Addition
NAME	HOAGLAND, GEORGE M SR		1.2 NAME			
STREET ADDRESS	5325 14TH STREET WEST		1.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL		1.4 CITY-ST-ZIP			
TITLE	VD	DELETE	2.1 TITLE		Change	Addition
NAME	HOAGLAND,GEORGE M JR		2.2 NAME			
STREET ADDRESS	5325 14TH STREET WEST		2.3 STREET ADDRESS	·		
City-St-ZiP	BRADENTON FL		2 4 CITY-ST-ZIP			
TITLE	STD	DELETE	3.1 THTLE		Change	Addition
NAME	HOAGLAND, MARY J.		3 2 NAME			
STREET ADDRESS	5325 14TH STREET WEST		3.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL		3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CATY - ST - ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			54 CITY+ST-ZIP			
TITLE		DELETE	61 TITLE		Change	☐ Addition
NAME			62 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			
CiTY-ST-73P			64 CiTY-ST-7IP			

14. I hereby certify that the information supplied with this filing 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 changed, 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 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.

SIGNATURE: