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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED Feb 20, 1999 8:00 am Secretary of State

,	1999		DIVISIO	ON OF COP	RPORATI	ONS		02-20-1999 90072 014	***150.00	
DOCUN 1. Corporation	MENT # 67	7631			_					
	AGLAND PONTIAC	-GMC, INC.								
Principal Place	of Business		Mailing Address						il grant Biath arant ast	EST OFFIC SERS
5325 14TH STRI			5325 14TH STREET WEST					,		
BRADENTON FL	34207-3307		BRADENTON FL 3	1207-3307				DO NOT WRITE IN TH	IIS SPACE	· ·
								3. Date Incorporated or Qualifed		Ì
			2- Mailing Addro					07/01/1980 4. FEI Number	Apr	lied For
2. Principal Place of Business			2a. Mailing Address					64-0502811	<u> </u>	Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 A	
22			27						Fee Rec	
City & State		1	City & State					6. Election Campaign Financing Trust Fund Contribution	\$5.00 N Added to	•
Zip	Country		Z8 Zip		Country	, –		8. This corporation owes the current year		
24	25	<u> </u>	29	30				Personal Property Tax.	☐ Yes 〔	□No
	9. Name and Addres	s of Current Re	gistered Agent		04	Lar		10. Name and Address of New Register	ed Agent	
LIAD	DISON & INSERH				81				.,	
HARRISON, G. JOSEPH NCNB BANK BLDG., 4TH FLOOR					82	Stre	et Addr	ress (P.O. Box Number is Not Acceptable)		
1201 6TH AVENUE, WEST					83		-			,, , ,
BRADENTON FL 34205					84 City				85 Zip C	ode
						'			• L)	
11. Pursuant	to the provisions of Secti	ons 607.0502 ar	d 607.1508, Florid	la Statutes,	the abov	e-narr	ed corp	poration submits this statement for the purpose	of changing its	registered iistered
office or re agent. I a	egistered agent, or both, m familiar with, and acce	in the State of F pt the obligation:	iorida. Such chang s of, Section 607.0	je was aum 505, Florida	a Statutes	111 0 0	Jiporauc	poration submits this statement for the purpose on's board of directors. I hereby accept the appropriate the statement for the purpose on the statement for the purpose of the statement for	p	,
SIGNATURE								ed when reinstating) DATE		
12.	Signature, typed or printed name	of registered agent and FICERS AND D		(NOTE: Re	13.	nt signa	ure require	ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE	PD	TIOETTO ATTO	□ DE	LETE	1.1 TITLE				☐ Change	Addition
NAME	HOAGLAND, GEORG	GE M SR			1.2 NAME			r		
STREET ADDRESS	5325 14TH STREET				1.3 STREE	T ADDR	ESS			
CITY-ST-ZIP	BRADENTON FL				1.4 CITY-S	ST-ZIP	_		Change	Addition
TITLE	VD		□ 0	LETE	2.1 TITLE				Grange	
NAME	HOAGLAND, GEORG				2.2 NAME 2.3 STREE	T ADDD	. 92			
STREET ADDRESS	5325 14TH STREET BRADENTON FL	MEDI		i	2.4 CITY-		-30	نت المناسبة		
CITY-ST-ZIP TITLE	STD	<u>.</u>	☐ DI	LETE	3.1 TITLE				☐ Change	Addition
NAME	HOAGLAND, MARY	J.			3.2 NAME					
STREET ADDRESS	5325 14TH STREET	WEST			3.3 STREE	TADOR	ESS			
CITY-ST-ZIP	BRADENTON FL	 		ELETE	3.4. CITY-	ST-ZIP			☐ Change	Addition
TITLE			L D	5LE1E	4.1 TITLE 4. 2 NAME					_
NAME STREET ADDRESS					4.3 STREE		ESS			
CITY-ST-ZIP					4.4 CITY-8		<u> </u>		<u></u>	
TITLE	-		□ DI	LETE	5.1 TITLE				☐ Change	☐ Addition
NAME					5.2 NAME					
STREET ADDRESS					5.3 STREE		E\$S			
CITY-ST-ZIP				ELETE	5.4 CITY-5 6.1 TITLE		+		Change	Addition
TITLE	1		<u> </u>	LLE1E	,,,,,		- 1			

CITY-ST-ZIP 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 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

V-PRES. G. M. HOAGLAND A JR 2/6/99

941-756-9544