

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 679979

Entity Name: GAINESVILLE MOTORS, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

3000 NORTH MAIN STREET
P.O. BOX 115
GAINESVILLE, FL 32602

New Principal Place of Business:

3000 NORTH MAIN STREET
GAINESVILLE, FL 32609

Current Mailing Address:

3000 NORTH MAIN STREET
P.O. BOX 115
GAINESVILLE, FL 32602

New Mailing Address:

3000 NORTH MAIN STREET
GAINESVILLE, FL 32609

FEI Number: 59-2021792

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH, CHRISTOPHER
2025 SW 112TH ST
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SULLIVAN, ARTHUR
Address: 4000 SW COLLEGE ROAD
City-St-Zip: OCALA, FL 34474

Title: VPD () Delete
Name: KENNEDY, JEFF
Address: 1427 HEMINGWAY PLACE
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: BOSTIC, WANDA
Address: P.O. BOX 1059
City-St-Zip: STEINHATCHEE, FL 32359

Title: VD () Delete
Name: SMITH, CHRISTOPHER
Address: 2025 SW 112TH ST.
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: SULLIVAN, BARBARA
Address: 1469 N LAKE WAY.
City-St-Zip: PALM BEACH, FL 33480

Title: T () Delete
Name: CROWN, CHARLES A
Address: 1108 HIGHLAND ACRES
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER SMITH

VP

04/27/2009

Electronic Signature of Signing Officer or Director

Date