

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708018

FILED
Apr 18, 2007
Secretary of State

Entity Name: THE FLORIDA AUTOMOTIVE WHOLESALERS ASSN., INC.

Current Principal Place of Business:

15619 PREMIERE DR
101
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

15619 PREMIERE DR
101
TAMPA, FL 33624

New Mailing Address:

FEI Number: 59-0759240 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

EHRHARD, GEORGE E
15619 PREMIERE DR
STE # 101
TAMPA, FL 33624 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SOTTILE, EILEEN
Address: 2900 S PORT ROYALE DRIVE
City-St-Zip: FT LAUDERDALE, FL 33308

Title: T () Delete
Name: DAVIS, C VICTOR
Address: 820 NW 27TH AVE
City-St-Zip: OCALA, FL 34475

Title: VP () Delete
Name: WIGGINS, STEVE
Address: 116 W 15TH STREET
City-St-Zip: PANAMA CITY, FL 32401

Title: S () Delete
Name: LILES, JARRETT
Address: 1127A WEST ORANGE AVENUE
City-St-Zip: TALLAHASSEE, FL 32310

Title: ED () Delete
Name: EHRHARD, GEORGE E
Address: 15619 PREMIERE DR STE # 101
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WIGGINS, STEVE
Address: 116 W 15TH ST.
City-St-Zip: PANAMA CITY, FL 32401

Title: T (X) Change () Addition
Name: SOTTILE, EILEEN
Address: 2900 S PORT ROYALE DR
City-St-Zip: FT LAUDERDALE, FL 33308

Title: VP (X) Change () Addition
Name: LILES, JARRETT
Address: 3610 CRAWFORDVILLE HWY
City-St-Zip: TALLAHASSEE, FL 32302

Title: S (X) Change () Addition
Name: SMITH, KATHY
Address: 2640 NW 10TH ST
City-St-Zip: OCALA, FL 34475

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE E EHRHARD

ED

04/18/2007

Electronic Signature of Signing Officer or Director

Date