FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 24 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **746043** **(9)**

1. Corporation Name

ORLANDO CHEVROLET DEALERS ADVERTISING ASSOCIATIO N, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
780 E. MERRITT ISLAND CSWY. P.O. BOX 541425 MERRITT ISLAND FL 32954-1425	780 E. MERRITT ISLAND CSWY. P.O. BOX 541425 MERRITT ISLAND FL 32954-1425

3. Date Incorporated or Qualified: 02/22/1979
3a. Date of Last Report: 06/13/1994
4. FEI Number: 59-2269662 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

STARLING, BRUCE C.
1004 LANCASTER DR.
ORLANDO FL 32806

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City **FL** 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	P	☒ Change ☐ Addition
NAME	GIBBS, TOM	1.2 NAME	KEVIN MEALEY	
STREET ADDRESS	E. STATE ROAD 100	1.3 STREET ADDRESS	3707 COLONIAL DR.	
CITY-ST-ZIP	BUNNELL FL	1.4 CITY-ST-ZIP	ORLANDO, FL	
TITLE	V	2.1 TITLE		☐ Change ☐ Addition
NAME	HOLLER, ROGER W	2.2 NAME		
STREET ADDRESS	860 FAIRBANKS AVE.	2.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL	2.4 CITY-ST-ZIP		
TITLE	ST	3.1 TITLE		☐ Change ☐ Addition
NAME	STEELE, ROBERT B	3.2 NAME		
STREET ADDRESS	780 E MERRITT ISL CSWY	3.3 STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND, FL 00000	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE	D	☒ Change ☐ Addition
NAME	MEALEY, KEVIN	4.2 NAME	GLEN RITCHEY	
STREET ADDRESS	3707 COLONIAL DRIVE	4.3 STREET ADDRESS	551 N. NOVA RD	
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	D	5.1 TITLE	D	☒ Change ☐ Addition
NAME	KEARCE, CLARENCE	5.2 NAME	ALAN STARLING	
STREET ADDRESS	5800 LE VISTA BLVD.	5.3 STREET ADDRESS	2499 N. ORANGE BLOSSOM TR	
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP	KISSIMMEE, FL	
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	GANNAWAY, VANN	6.2 NAME		
STREET ADDRESS	15140 US HWY. 441	6.3 STREET ADDRESS		
CITY-ST-ZIP	EUSTIS FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: R. B. STEELE Treasurer 04/19/95 (407) 452-6700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #