

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 746043 (9)

1. Corporation Name

ORLANDO CHEVROLET DEALERS ADVERTISING ASSOCIATIO
N, INC.

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



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

3. Date Incorporated or Qualified

02/22/1979

3a. Date of Last Report

04/24/1995

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME MEALEY, KEVIN
STREET ADDRESS 3707 COLONIAL DR
CITY-ST-ZIP ORLANDO FL

11 TITLE ☐ Change ☐ Addition

12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE V ☐ DELETE

NAME HOLLER, ROGER III
STREET ADDRESS 860 FAIRBANKS AVE.
CITY-ST-ZIP WINTER PARK FL

21 TITLE ☐ Change ☐ Addition

22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE ST ☐ DELETE

NAME STEELE, ROBERT B
STREET ADDRESS 780 E MERRITT ISL CSWY
CITY-ST-ZIP MERRITT ISLAND, FL 00000

31 TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME RITCHEY, GLEN
STREET ADDRESS 551 N NOVA RD
CITY-ST-ZIP DAYTONA BEACH FL

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME STARLING, ALAN
STREET ADDRESS 2499 N ORANGE BLOSSOM TR
CITY-ST-ZIP KISSIMEE FL

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME GANNAWAY, VANN
STREET ADDRESS 15140 US HWY. 441
CITY-ST-ZIP EUSTIS FL

61 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 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)(k), 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

01/30/96

(407) 452-6700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)