FILE NOW: FILING FEE IS \$61.25									
NONPROFIT CORPORATION ANNUAL REPORT			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State						
1996			DIVISION OF CORPORATIONS						
DOCUMENT # 752262 (6)									
GAINESVILLE NEW AUTOMOBILE DEALERS ASSOCIATION, INC.							I ABBITE DOOR DISTURDED TRADE OF	i lene alanı alanı arakı	DJAH DIDI AFAH JARF
Principal Place of Business Mailing Address									
C/O VAR HEYL. S/T GAINESVILLE FL 32653 GAINESVILLE FL 32653			00 N.W. 71ST PLACE O VAR HEYL, S/T NNESVILLE FL 32653				, <u>, , , , , , , , , , , , , , , ,</u>		
US		US	• 				3. Date Incorporated or Qualified 04/30/1980	3a. Date of I 05/0	Lest Report 1/1995
2. Principal P 21	lace of Business	2a. 26	Mailing Address				4. FEI Number 59-2018784		Applied For Not Applicable
Suite, Apt.	Suite, Apt. #, etc. 22			Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 Additional ee Required
City & Stati	θ	28	City & State				6. Election Campaign Financing Trust Fund Contribution	<b>S</b>	5.00 May Be dded to Fees
Zip 24	Cou 25	29	Zip	Co 30	untry		8. This corporation has liability for in Florida Statutes		
	9. Name and Ad	dress of Current Registe	ored Agent		B1 Name		10. Name and Address of New R	egistered Agent	
BRASINGTON, JOHN T B2 Street Address (P.O. Box N							(P.O. Box Number is Not Acceptabl	e)	
2001 NW 13TH ST GAINESVILLE FL 32601									
					84 City		· · · · · · · · · · · · · · · · · · ·	85	Zip Code
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, to					ve-named o	orooratio	n submits this statement for the pure	<u> </u>	
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 na	me of registered agent and title if app	okcable. (NOT	E Registere	Agent signature	required wh	an reinstating)	DATE	
12. TITLE	STD	OFFICERS AND DIRECT	ORS	13.	7 F		ADDITIONS/CHANGES TO OFFI		
NAME	HEYL, VAR			1.1 T 1.2 N				🔲 Chan	ge Addition
STREET ADDRESS	s 2300 NW 71ST PL.			1.3 STREET ADDRESS					8
CITY - ST - ZIP	GAINESVILLE FL		E-bori cric	1.4 CITY-ST-ZIP					101
TITLE NAME	vpd Brasington, John T		DELETE			PD		x Chan	ge 🗌 Addition 🛛
STREET ADDRESS	2001 N.W. 13TH GAINESVILLE FI	I ST		2.3 S	IREET ADDRESS	200	sington, John T 1 N. W. 13th St.		
CITY-ST-ZIP TITLE	PD		DELETE	2.4 ( 3.1 T	ITY-ST-ZIP	Gai VPD	nesville, Florid	la, <u>3260</u> X Chan	pe Addition
NAME	STRICKLAND, L	EROY	×	3.2 N			m Rohlman	<b>A</b> _1 • • • •	
STREET ADDRESS	4025 N MAIN S			335	REET ADDRESS		5 N. Main St.		
CITY-ST-ZIP TITLE	GAINESVILLE FI	<u> </u>		3.4. ( 4.1 Ti	ITY-ST-ZIP	Gai	lnesville, Fl. 3		
NAME	BRASINTON, JC	HN		4.11				Chan	ge 🔲 Addition
STREET ADDRESS	2001 N.W. 13TH				REET ADDRESS				
CITY-ST-ZIP	GAINESVILLE FI	•		4.4 C	TY-ST-ZIP				
TITLE			DELETE	5.1 TI				🗖 Chan	e 🗋 Addition
NAME STREET ADDRESS	HAWES, T. J 3535 N. MAIN S	т		5.2 N					
CITY-ST-ZIP	GAINESVILLE FI				REET ADDRESS				
TITLE			DELETE	61T				Chan;	ge 🔲 Addition
				6.2 N					
STREET ADDRESS CITY - ST - ZIP					REET ADDRESS				
14. I do hereb	y certify that the inform	nation supplied with this fili	ng is voluntarily furnis	hed and	TY-ST-ZIP does not qua	L alify for th	e exemption stated in Section 119.0	7(3)(k), Florida Sta	tutes. 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 of changed, or on an attemment with an address.									
SIGNATURE: Var Hey1 STD 4-16-96 352-375-3222 SIGNATURE AND TYPED OR PRIVED NAME OF BIONING OFFICER OR DIRECTOR Date Of Director									