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Feb 28 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 753259 (1)

1. Corporation Name

BROWARD-DADE CHEVROLET DEALER ADVERTISING ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1415 E. SUNRISE BLVD.  
SUITE 412  
FORT LAUDERDALE FL 333041415 E. SUNRISE BLVD.  
SUITE 412  
FORT LAUDERDALE FL 33304-23563. Date Incorporated or Qualified  
07/07/19803a. Date of Last Report  
02/26/1996

2. Principal Place of Business

2a. Mailing Address

21 4028 Ponce de Leon Blvd.

26 4028 Ponce de Leon Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Coral Gables, FL. 33146

27 Coral Gables, FL.

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24 33146

25 Dade

29 33146

30 Dade

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEHTONEN, LARRY  
1519 N.W. 113TH WAY  
PEMBROKE PINES FL 33026

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 DV ☐ DELETE  
NAME KAHN, ALBERT L.  
STREET ADDRESS 7220 N. KENDALL DR.  
CITY - ST - ZIP MIAMI FL1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIPTITLE STD ☐ DELETE  
NAME WILDSTEIN, LARRY  
STREET ADDRESS 8880 BISCAYNE BLVD.  
CITY - ST - ZIP MIAMI FL2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIPTITLE VD ☐ DELETE  
NAME MAROONE, MICHAEL E.  
STREET ADDRESS 8600 PINES BLVD  
CITY - ST - ZIP PEMBROKE PINES FL3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIPTITLE PD ☐ DELETE  
NAME BACHRODT, LOU  
STREET ADDRESS 1801 WEST ATLANTIC BOULEVARD  
CITY - ST - ZIP POMPANO BEACH FL4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 4, 1997

(305) 567-9570

Date

Daytime Phone # 0035531

CR2E037 (9/96)