2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#821246

City-St-Zip:

NAPLES, FL 34102

Entity Name: DICK DEVOE BUICK-CADILLAC, INC.

FILED Jan 25, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
4100 TAMIAMI TRAIL, NORTH P. O. BOX 1098 NAPLES, FL 33940				4100 TAMIAMI TRAIL, NORTH P. O. BOX 1098 NAPLES, FL 34103		
Current Mailing Address:				New Mailing Address:		
4100 TAMIAMI TRAIL, NORTH P. O. BOX 1098 NAPLES, FL 33940				4100 TAMIAMI TRAIL, NORTH P. O. BOX 1098 NAPLES, FL 34103		
FEI Number: 35-1051129 FEI Number Applied For () FEI Nu			mber Not Applicable () Certificate of Status Desired (X)			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
DEVOE, MARK A. 2601 AIRPORT ROAD SOUTH NAPLES, FL 34112 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,						
in the State		submits this statement for the pu	irpose o	or changing i	s registered oπice or registered	agent, or both,
SIGNATURE:						
	Electron	ic Signature of Registered Ager	nt		Date	
Election Can	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () DEVOE, RICHA 106 WILDERNE NAPLES, FL 34	SS DR		Title: Name: Address: City-St-Zip:	D (X) Change () Addition DEVOE, RICHARD H, 106 WILDERNESS DR NAPLES, FL 34105	
Title: Name: Address: City-St-Zip:	D () DEVOE, DONAL 530 16TH AVE S NAPLES, FL 34	5		Title: Name: Address: City-St-Zip:	VD (X) Change () Addition DEVOE, DONALD P, 530 16TH AVE S NAPLES, FL 34102	
Title: Name: Address: City-St-Zip:	WHITLEY, STE	RST ST - SUITE 300		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KELLY, CHARĹ	GATE PKWY - SUITE 305		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD () DEVOE, BARBA 106 WILDERNE NAPLES, FL 34	SS DR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VD () DEVOE, MARK 1843 8TH ST. S			Title: Name: Address:	PD (X) Change () Addition DEVOE, MARK A., 1843 8TH ST S	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip: NAPLES, FL 34102

SIGNATURE: MARK A. DEVOE PD 01/25/2007