## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

151

FILED Mar 26 1998 8:00am Secretary of State

	COLA CHRYSLER-PLYMOU	` '				
Principal Place of Business Mailing Address						i dinii minii mimii niail ninii irii
PENSACOLA 6105 PENSACOLA BLVD.						
8105 PENSACOLA BLVD. P. O. BOX 17328 PENSACOLA FL 32505 PENSACOLA FL 32522					DO NOT WRITE IN T	HIS SPACE
US FERONOUTH TE SESSEE					3. Date Incorporated or Qualified	THO GITTOE
					11/08/1977	
2. Principal P	Place of Business	2s. Mailing Address		4. FEI Number	Applied For	
21		26		59-1773900	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & Stat		City & State			Fee Required	
23		28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country Zip		Count	ry	8. This corporation owes or has paid th	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registe	ered Agent
	CORPORATION SYSTEM		8	1 Name		
	00 S. PINE ISLAND ROAD		8	2 Street Ad	dress (P.O. Box Number is Not Acceptable)	
PU	ANTATION FL 33324		8	2		
			"			
			В	84 City FL 85 Zip Code		
11. Pursuant office or ragent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the oblig	02 and 607.1508, Florida Statut e of Florida. Such change was gations of, Section 607.0505, Fl	es, the abo authorized I orida Statut	ve-named co by the corpor es.	rporation submits this statement for the purporation's board of directors. I hereby accept the	se of changing its registered appointment as registered
	Signature, lyped or printed name of registered ag			gent signature req		ATE
12.	OFFICERS AN	ID DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	ST GERMAIN, BETTIE L.	ET DETEIL	1.1 TITLE	l l		Change Addition
NAME STREET ADDRESS	4040 DOMBIE DDME		1.2 NAMI	ET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL		1.4 CITY	ľ		
TITLE	P					Change Addition
NAME	8105 PENSACOLA BLVD. PENSACOLA FL		2.2 NAMI	£ 1		
STREET ADDRESS			2.3 STRE	ET ADDRESS		
CITY-ST-ZIP			2. 4 CITY	- ST - ZIP		
TITLE	DELETE 3.1		3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAMI	ĺ		
STREET ADDRESS				et address		
CITY-ST-ZIP	DELETE		3.4. CITY 4.1 TITLE			Change Addition
TITLE	L'J DECETE		4.1 TITLE 4.2 NAM			L CHANGE L MUNICON
NAME etheet annocce						
STREET ADDRESS			4.4 CITY	ET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE			Change Addition
NAME		52		J		
STREET ADDRESS			ı	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY-			
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME	:		
STREET ADDRESS	DAESS DAESS		6.3 STRE	ET ADDRESS		
CITY-ST-ZIP			6.4 CITY			
94 I boroby o	sartifu that the information augustical u	with this filing door not awaliful.	ar tha awam	ation stated i	in Conting 110.07(3)(i) Florido Statutos, I furth	or portify that the information

I 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 tustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changid, or on an attactment with an address.