2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # 853544

Entity Name
JERRY HAMM CHEVROLET, INC.

Principal Place of Business	Mailing Address
2600 PHILLIPS HWY. P.O. BOX 5749 JACKSONVILLE, FL 32247 US	2600 PHILLIPS HWY. P.O. BOX 5749 JACKSONVILLE, FL 32247

01182006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2207395 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HAMM, JERRY T.
2600 PHILLIPS HWY.
JACKSONVILLE, FL 32207

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000081337514
01/30/06-80053-004 150.00

OFFICERS AND DIRECTORS

TITLE	PD
NAME	HAMM, JERRY T.
STREET ADDRESS	5127 LOURCEY RD.
CITY-ST-ZIP	JACKSONVILLE, FL
TITLE	VPD
NAME	HAMM, DAVID J
STREET ADDRESS	275 SOUTH 1ST STREET #101
CITY-ST-ZIP	JACKSONVILLE BEACH, FL 32250
TITLE	STD
NAME	BREWTON, R. GERALD
STREET ADDRESS	12662 MISSION HILLS CIRCLE S.
CITY-ST-ZIP	JACKSONVILLE, FL 32225
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Reginald Brewton 1/18/06 904-398-3036
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #