2002 UNIFORM BUSINESS REPORT (UBR)

0006347 AT

FILED
02 FEB 28 AM 10: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A93000000581

1. Entity Name

CH MOTORS, LTD.

Principal Place of Business	Mailing Address
4306 PABLO OAKS COURT JACKSONVILLE FL 32224	P.O. BOX 16469 JACKSONVILLE FL 32245

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DUE BY MAY 1, 2002

4. FEI Number 59-3185442 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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.

SIGNATURE ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. $7,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	M98000001271	STREET ADDRESS	900005041299--6
NAME	ASBURY JAX MANAGEMENT LLC		-03/04/02--01113--016
STREET ADDRESS	4306 PABLO OAKS COURT	CITY-ST-ZIP	****141.25 ****141.25
CITY-ST-ZIP	JACKSONVILLE FL 32224		
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CR2E003 (9/01)

STAPLE CHECK HERE

14. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

Linda L Marlette, Treasurer

SIGNATURE: Linda L Marlette Asbury Jax Management LLC 2-20-02 904-992-4110
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #