

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001239

Entity Name: GAINESVILLE FORD, INC.

FILED
Jul 09, 2008
Secretary of State

Current Principal Place of Business:

3333 NORTH MAIN STREET
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

3333 NORTH MAIN STREET
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 59-3630983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MAJERCIK, SCOTT
Address: 16800 EXECUTIVE PLAZA DRIVE
City-St-Zip: DEARBORN, MI 48126

Title: D () Delete
Name: WOLF, TONY
Address: 1455 LINCOLN PKWY. SUITE 450
City-St-Zip: ATLANTA, GA 30346

Title: P () Delete
Name: ALVAREZ, JOSEPH
Address: 3333 NO MAIN ST
City-St-Zip: GAINESVILLE, FL 32609

Title: S () Delete
Name: LOEFFLER, TAMMY L
Address: 3333 N MAIN STREET
City-St-Zip: GAINESVILLE, FL 32609

Title: D () Delete
Name: SIMMONS, ARNOLD
Address: 1455 LINCOLN PKWY. SUITE 450
City-St-Zip: ATLANTA, GA 30346

Title: S () Delete
Name: DURBIN, PETER
Address: 1455 LINCOLN PKWY SUITE 450
City-St-Zip: ATLANTA, GA 30346

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MR (X) Change () Addition
Name: YOKES, ROBERT D
Address: 3333 N MAIN STREET
City-St-Zip: GAINESVILLE, FL 32609

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: ROBERT D YOKES JR

S/T

07/09/2008

Electronic Signature of Signing Officer or Director

Date