2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 20, 2009
Secretary of State

DOCUMENT# F03000004675

Entity Name: PRESTIGE SATURN OF JACKSONVILLE, INC.

Current Principal Place of Business:

10863 PHILLIPS HIGHWAY
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

10863 PHILLIPS HIGHWAY
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 16-1678030 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title:	PCD	( ) Delete
Name:	JACKSON, GREGORY	
Address:	10863 PHILLIPS HIGHWAY	
City-St-Zip:	JACKSONVILLE, FL 32256	
Title:	VD	( ) Delete
Name:	POUNDS, WILLIAM D	
Address:	10863 PHILLIPS HIGHWAY	
City-St-Zip:	JACKSONVILLE, FL 32256	
Title:	ST	( ) Delete
Name:	KIDDER, CYRIL	
Address:	10863 PHILLIPS HIGHWAY	
City-St-Zip:	JACKSONVILLE, FL 32256	
Title:	D	(X) Delete
Name:	LIVY, JOHN	
Address:	11006 RUSHMORE DR.,STE # 250	
City-St-Zip:	CHARLOTTE,, NC 28277	
Title:	D	(X) Delete
Name:	LEE, BRIAN S	
Address:	11700 GREAT OAKS WAY	
City-St-Zip:	ALPHARETTA, GA 30022	
Title:	D	(X) Delete
Name:	OLIVER, C.E.	
Address:	100 RENAISSANCE CTR.	
City-St-Zip:	DETROIT, MI 48265	

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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: WILLIAM D. POUNDS VD 11/20/2009

Electronic Signature of Signing Officer or Director — Date