2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005968

Entity Name: HOMETOWN AUTO SALES (GEORGIA), INC.

FILED Mar 15, 2005 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | | |
|--|---|--|--------------------------------------|---|--|-------------|---------------------------|
| 406 EAST OGLETHORPE BLVD. ALBANY, GA 31705 | | | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | |
| 406 EAST OGLETHORPE BLVD. ALBANY, GA 31705 | | | 5517 HANSEL AVE ORLANDO, FL 32809 | | | | |
| FEI Number: 6 | 65-1187011 | FEI Number Applied For () | FEI Num | nber Not Appli | cable () | Certifica | ite of Status Desired () |
| Name and | Address of C | urrent Registered Agent: | | Name and | Address of | New Reg | istered Agent: |
| WARD, WIL 5517 HANS ORLANDO, | EL AVENUE | US | | | | | |
| 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: | | | | | | | |
| Election Cam | | ic Signature of Registered Agent 3 Trust Fund Contribution (). | | | | | Date |
| | AND DIREC | | | ADDITIONS | S/CHANGE | S TO OFF | ICERS AND DIRECTORS: |
| Title: Name: Address: City-St-Zip: | C () MATHES, PATR 1702 WATERW ORLANDO, FL | TTCH DRIVE | | Title: Name: Address: City-St-Zip: | | () Change(| () Addition |
| Title: Name: Address: City-St-Zip: | PST () WARD, WILLIAI 1154 OAK CRE WINTER SPRIN | EK COURT | | Title: Name: Address: City-St-Zip: | P WARD, WILL 1154 OAK CI WINTER SPI | REEK COUR | Т |
| Title: Name: Address: City-St-Zip: | VC () MATHES, D. MIO 6319 GIBSON D ORLANDO, FL | DR . | | Title: Name: Address: City-St-Zip: | | ()Change(| () Addition |
| Title: Name: Address: City-St-Zip: | VC () MATHES, MARC 6319 GIBSON D ORLANDO, FL | DR . | | Title: Name: Address: City-St-Zip: | | () Change(| () Addition |
| Title: Name: Address: City-St-Zip: | () | Delete | | Title: Name: Address: City-St-Zip: | VP BUNTIN, CHA 315 OAKBEN ATHENS, GA | ID DRIVE | (X) Addition |
| Title: Name: Address: City-St-Zip: | () | Delete | | Title: Name: Address: City-St-Zip: | S SMYLIE, DE ¹ 1573 ROCHE OVIEDO, FL | ELLE LANE | (X) Addition |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 R WARD PRES 03/15/2005