-SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS 97 JUL 22 AM 11: 52 DOCUMENT # F29620 (4)SECHETARY OF STATE TALLAHASSEE, FLORIDA MAROONE CHEVROLET, INC. Principal Place of Business Mailing Address 450 E. LAS OLAS BLVD. FT. LAUDERDALE FL 33301 450 E. LAS OLAS BLVD. FT. LAUDERDALE FL 33301 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 0<u>4/24/19</u>81 05/01/1996 2. Principal Place of Business 2a. Mailing Address Applied For 59-2091114 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Country Zio Country Zip 8. This corporation owes or has paid the current year Intangible 24 Yes 25 29 30 Personal Proporty Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and trie if applicable (NOTE: Registered Agont signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. 497 DELETE TITLE 1.1 TITLE 500002245**76**5---HAWKINS, THOMAS W NAME 1.2 NAME **CR2E034** 450 E. LAS OLAS BLVD., #1200 STREET ADDRESS 1.3 STREET ADDRESS ****550.00 ****550.00 FT. LAUDERDALE FL 33301 CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change ☐ Addition TITLE 2.1 TITLE James O Colle HANDLEY, RICHARD L 2.2 NAME NAME 450 E. LAS OLAS Bluck, #1200 450 E. LAS OLAS BLVD., #1200 STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL 33301 auderdale. FL 33301 2 4 CITY-ST-ZIP CITY - RF - ZIP DELETE Change Addition TITLE 3.1 TITLE MAROONE, MICHAEL E michael E. Marcone NAM 3 2 NAME YEO E. UNS OLAS BLID. # 1200 TH. LAUDERDALE, FL 33301 450 E. LAS OLAS BLVD., #1200 3.3 STREET ADDRESS STRATE ADDRESS FT. LAUDERDALE FL 33301 CITY-ST-ZIP 3.4. CITY-S1-ZIP DELETE TITLE 4.1 TITLE Change Addition REESE, DONALD J NAME 4. 2 NAME 450 E. LAS OLAS BLVD., #1200 STREET ADDRESS 4.3 STREET ADDRESS FT. LAUDERDALE FL 33301 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE HODGEN, BRAD NAME **5.2 NAME** 450 E. LAS OLAS BLVD., #1200 5.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33301 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change TITLE 6.1 TITLE Addition KAthleen Hule PEDDY, COURTLAND NAME 6.2 NAME 450 E. LAS CLAS Blud. # 1800 450 E. LAS OLAS BLVD., #1200 63 STREET ADDRESS STREET ADDRESS 17. Janderdale, 77 FT. LAUDERDALE FL 33301 33301 14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the

information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

OVER TISE
