


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # F82503 (6) 1. Corporation Name SUTHERLIN TOYOTA, INC.		



Principal Place of Business 8501 US HWY 19 NORTH PINELLAS PARK FL 34665	Mailing Address 8501 US HWY 19 NORTH PINELLAS PARK FL 34665
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DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 05/18/1982	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
4. FEI Number 59-2324665 Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent JOHANSEN, DWANE 8501 US 19 NORTH PINELLAS PARK FL 34665		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	P
NAME	JOHANSEN, DWANE	1.2 NAME	Leland O. Johansen
STREET ADDRESS	9988 WINDTREE BLVD.	1.3 STREET ADDRESS	110 S.E. 6th ST.
CITY-ST-ZIP	SEMINOLE FL	1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33301
TITLE	VPST	2.1 TITLE	VSD
NAME	SUTHERLIN, GEORGE	2.2 NAME	James O. Cole
STREET ADDRESS	1988 THORNTON RD.	2.3 STREET ADDRESS	110 S.E. 6th ST.
CITY-ST-ZIP	LITHA SPRINGS FL	2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33301
TITLE		3.1 TITLE	D
NAME		3.2 NAME	Thomas W. Hawkins
STREET ADDRESS		3.3 STREET ADDRESS	110 S.E. 6th ST.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33301
TITLE		4.1 TITLE	T
NAME		4.2 NAME	KATHIEEN HYLE
STREET ADDRESS		4.3 STREET ADDRESS	110 S.E. 6th ST.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33301
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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.

SIGNATURE \_\_\_\_\_ 4-16-98

CR2E034 (10/97)