

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/30/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$275)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham,
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 30 AM 9:44

DOCUMENT # F94000005082 (2)

1. Corporation Name

DANIELS SATURN, INC.

Principal Place of Business

NORTH MAIN ST.
GAINESVILLE FL 32601

Mailing Address

NORTH MAIN ST.
GAINESVILLE FL 32601

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/30/1994

3a. Date of Last Report

4. FID Number # 59-3265729
APPLIED FOR

Applied For
Not Application

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. This corporation has liability for information this calendar year (1994) under
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 3737 NORTH MAIN ST.

2a. Mailing Address

26 3737 NORTH MAIN ST.

State Apt # etc

State Apt # etc

City & State

23 GAINESVILLE, FL.

City & State

28 GAINESVILLE, FL.

Zip

Country

24 32609

25 U.S.A.

Zip

Country

29 32609

30 U.S.A.

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
ROLAND C. DANIELS
82 Street Address (P.O. Box Number is Not Acceptable)
3737 NORTH MAIN STREET
83
84 City GAINESVILLE FL 85 Zip Code 32609

11. Pursuant to the provisions of Sections 607.0602 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 provisions of Section 607.1505, Florida Statutes.

SIGNATURE *Roland C. Daniels* ROLAND C. DANIELS, PRESIDENT

6/27/95

12. OFFICERS AND DIRECTORS

12.1	NAME	PD DANIELS, ROLAND C
12.2	STREET ADDRESS	NORTH MAIN ST.
12.3	CITY, STATE, ZIP	GAINESVILLE FL 32601
12.4	NAME	SD CHELLAND, E J
12.5	STREET ADDRESS	5855 T.G. LEE BLVD.
12.6	CITY, STATE, ZIP	ORLANDO FL 32822
12.7	NAME	D ROSENALT, W A
12.8	STREET ADDRESS	5730 GLENRIDGE DR.
12.9	CITY, STATE, ZIP	ATLANTA GA 30328
12.10	NAME	
12.11	STREET ADDRESS	
12.12	CITY, STATE, ZIP	
12.13	NAME	
12.14	STREET ADDRESS	
12.15	CITY, STATE, ZIP	
12.16	NAME	
12.17	STREET ADDRESS	
12.18	CITY, STATE, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	NAME		☒ Change ☐ Action
13.2	NAME		
13.3	STREET ADDRESS	3737 NORTH MAIN STREET	
13.4	CITY, STATE, ZIP	GAINESVILLE, FL. 32609	
13.5	NAME		☐ Change ☐ Action
13.6	NAME		
13.7	STREET ADDRESS		
13.8	CITY, STATE, ZIP		
13.9	NAME		☐ Change ☐ Action
13.10	NAME		
13.11	STREET ADDRESS		
13.12	CITY, STATE, ZIP		
13.13	NAME		☐ Change ☐ Action
13.14	NAME		
13.15	STREET ADDRESS		
13.16	CITY, STATE, ZIP		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 139.07(1)(b), 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 13 of this report. If changed, by or for, accompanied with an affidavit.

SIGNATURE: *Roland C. Daniels* ROLAND C. DANIELS

6/27/95

305-255-7906