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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F9600006515 (8)

CROSS-CONTINENT AUTO RETAILERS, INC.

Principal Place of Business Mailing Address								ı labinda inim takın bitin badılı bankı bakı	80411 99410	i milal milal tibl	H THI A	I#I	
1201 S. TAYLOR AMARILLO TX 79101			1201 S. TAYLOR AMARILLO TX 79101-4313										
								3. Date Incorporated or Qualified 3a, Date of Last Report 12/13/1996					
2. Principal Place of Business			2a. Mailing Address				4.	FEI Number	т	TA	pplied	For	
21		26					П	75-2653095		<u> </u>		plicable	
Suite, Apt	#, etc	S	uite, Apt. #, etc.		-	**	1	. Certificate of Status Desired		\$8.75	~~~~		
22	The state of the s	27						Certificate of Status Desired	لبا	Fee R	Require	d be	
City & Sta	te		ity & State				6	Election Campaign Financing		\$5.00	May	Be	
23	Country	28		,			Ц.	Trust Fund Contribution		Added			
1	Zip Country					untry		8. This corporation has liability for intangible tax under s. 199.032,					
24 25 25 9. Name and Address of Current F			29 30 30 agistered Agent				Florida Statutes Yes PNo O, Name and Address of New Registered Agent						
~ ~ ~		Tont Hogisto	on Agont		81	Name	┦╜	, Name and Address of New Ast	hararan	Agent			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD						_							
PLANTATION FL 33324						Street Addres	sa (I	P.O. Box Number is Not Acceptab	e)				
r CN	MINITON I L 00027				83	,	┪						
						A.:	_						
					84	City			FL	85 Zip	Code		
11. Pursuant	to the provisions of Sections 607.	0502 and 607.	1508, Florida Stati	utes, the al	OOVE	-named corpo	ratio	on submits this statement for the p	urpose c	of changing	its reg	istered	
agent La	registored agent, or both, in the S am familiar with, and accept the of	tate of Florida. bligations of, S	Such change was section 607.0505, F	s authorizei Florida Stat	o by utes	/ the corporatio 3.	nje	board of directors. I hereby accep	t the ap	pointment as	aiget a	tered	
SIGNATURE												i	
	Signature, typed or printed harvor of registeror		· · · · · · · · · · · · · · · · · · ·	OTE: Registered	l Age	int signature required	wie	n reinstating)	DATE				
12.		AND DIRECTO	DRS DELETE	13.			_	ADDITIONS/CHANGES TO OFFIC	ERS AN				
TITLE NAME	CCEO		""] retest	1.1 T)						L Change	ليا	Addition	
STREET ADDRESS	GILLILAND, BILL 1201 S. TAYLOR			1.2 N/		ADDDEGG							
	AMARILLO TX 79101					ADDRESS							
C-TY - ST - ZiP TiTLE	D VMANICEO IX 78101		DELETE	1.4 CI 2 1 TF		T-ZIP	┿			Change		Addition	
NAME	GILLILAND, BILL			2.2 N/							لسا	riddilidir	
STREET ADDRESS	1201 S. TAYLOR					ADDRESS							
C(1Y - S1 - 71P	AMARILLO TX 79101					ST-ZIP			A4' 44				
THE	VCTD		DELETE	317			1	* * * * * * * * * * * * * * * * * * * *		Change		Addition	
NAMÉ	HALL, ROBERT W			3.2 N/	ME								
STREET ADDRESS	1201 S. TAYLOR			3357	REET	ADDRESS							
CITY+ST ZIP	AMARILLO TX 79101			3.4. C	ΠY-5	ST-ZIP							
THLÉ	VCD		DETELE	4.1 TI	TLE		Т			Change		Addition	
NAME	MAGER, EZRA P			4 2 N	AME								
STREET ADDRESS		LOOR		4.3 ST	REET	ADDRESS	ŀ						
CITY - ST - ZIP	NEW YORK NY 10022			4.4 CI	TY-S	T-ZIP						····	
TITLE	VC00		DELETE	5 1 TI	ILE					Change		Addition	
NAME	RICE, EMMETT M JR			5.2 N	ME								
STREET ADDRESS	1201 S. TAYLOR			53 ST	REET	ADDRESS							
CHY-ST-ZIP	AMARILLO TX 79101		December 1	5 4 CI	_	7-ZIP	_ _			- 			
Tilef	D COL CAMPETT M ID		☐ DELETE	6 1 TI						☐ Change	Ц	Addition	
NAME	RICE, EMMETT M JR			62 N/									
STREET ADDRESS	1201 S. TAYLOR			63 ST	REET	ADDRESS							

64 CITY-ST-ZIP 14. I do 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 chapted d, or on an attachment with an oddress.

SIGNATURE:

AMARILLO TX 79101

806/374-8653

FILED

Apr 02 1997 8:00am

Secretary of State

Daytime Prione # 0011806