

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006092

FILED
Jul 01, 2004
Secretary of State

Entity Name: SATURN RETAIL OF FLORIDA, INC.

Current Principal Place of Business:

SATURN OF ORLANDO SOUTH
8620 S. ORANGE BLOSSOM TR.
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

SATURN OF ORLANDO SOUTH
8620 S. ORANGE BLOSSOM TR.
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 62-1723009 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: JONES, MICHAEL H
Address: 3318 PARTING BROOK COURT
City-St-Zip: CHARLOTTE, NC 28210

Title: D () Delete
Name: HEISEL, MICHAEL L
Address: 31260 SUNSET DRIVE
City-St-Zip: FRANKLIN, MI 48025

Title: D () Delete
Name: MINARICK, JOHN F
Address: 41924 WATERWHEEL
City-St-Zip: NORTHVILLE, MI 48167

Title: V () Delete
Name: FLORY, MICHAEL L
Address: 42150 ECHO FOREST DRIVE
City-St-Zip: CANTON, MI 48188

Title: DP () Delete
Name: DANIELS, ROLAND
Address: 3737 N MAIN STREET
City-St-Zip: GAINESVILLE, FL 32609

Title: M () Delete
Name: SNYDER JR., JAMES W
Address: 1634 TIERTON ST
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL JONES

S

07/01/2004

Electronic Signature of Signing Officer or Director

_____ Date