

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 01, 2001 08:00 AM**
Secretary of State**DOCUMENT # F98000006028**1. Entity Name
AUTONATION FLOOR PLAN FUNDING CORP.Principal Place of Business
110 SE 6TH ST
20TH FLOOR
FT LAUDERDALE FL 33301Mailing Address
110 SE 6TH ST
20TH FLOOR
FT LAUDERDALE FL 33301

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0870729

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

ROLLIN KENNETH B

Street Address (P.O. Box Number is Not Acceptable)

110 SE 6TH STREET**20TH FLOOR**

City

FT. LAUDERDALE**FL**Zip Code
33301

8. 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 **KENNETH B. ROLLIN****05/01/2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **S** ☐ Delete
NAME **FERRANDO JONATHAN P**
STREET ADDRESS **110 SE 6TH ST**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**TITLE **VPD** ☐ Delete
NAME **SORENSEN PETER H**
STREET ADDRESS **2 WALL ST**
CITY-ST-ZIP **NEW YORK NY 10005**TITLE **V P** ☐ Delete
NAME **BOURHIS MARC L**
STREET ADDRESS **110 SE 6TH ST**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**TITLE **P** ☐ Delete
NAME **MAROONE MICHAEL E**
STREET ADDRESS **110 SE 6TH ST**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**TITLE **D** ☐ Delete
NAME **FERRANDO JONATHAN P**
STREET ADDRESS **110 SE 6TH ST**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**TITLE **D** ☐ Delete
NAME **BOURHIS MARC L**
STREET ADDRESS **110 SE 6TH ST**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **BILOTTA FRANK B**
STREET ADDRESS **110 SE 6TH ST**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**TITLE **VD** ☒ Change ☐ Addition
NAME **SORENSEN PETER H**
STREET ADDRESS **2 WALL ST**
CITY-ST-ZIP **NEW YORK NY 10005**TITLE **T** ☒ Change ☐ Addition
NAME **BOESE JENNIFER L**
STREET ADDRESS **110 SE 6TH STREET**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **DSV** ☒ Change ☐ Addition
NAME **FERRANDO JONATHAN P**
STREET ADDRESS **110 SE 6TH ST**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**TITLE **DV** ☒ Change ☐ Addition
NAME **BOURHIS MARC L**
STREET ADDRESS **110 SE 6TH ST**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **JONATHAN P. FERRANDO****SVD****05/01/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)