

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 27, 2000 08:00 AM**  
**Secretary of State**

**DOCUMENT # F99000006733**

1. Entity Name  
**AUTONATION HOLDING CORP.**

Principal Place of Business 110 SE 6TH STREET, 20TH FLOOR FORT LAUDERDALE FL 33301	Mailing Address 110 SE 6TH STREET, 20TH FLOOR FORT LAUDERDALE FL 33301
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	3. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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4. FEI Number  
**65-0723604**

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

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

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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 \_\_\_\_\_ DATE **04/27/2000**  
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

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, 2000 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	T	<input checked="" type="checkbox"/> Delete
NAME	<b>HYLE KATHLEEN</b>	
STREET ADDRESS	<b>110 SE 6TH STREET, 20TH FLOOR</b>	
CITY-ST-ZIP	<b>FORT LAUDERDALE FL 33301</b>	
TITLE	VS	<input checked="" type="checkbox"/> Delete
NAME	<b>COLE JAMES O</b>	
STREET ADDRESS	<b>110 SE 6TH STREET, 20TH FLOOR</b>	
CITY-ST-ZIP	<b>FORT LAUDERDALE FL 33301</b>	
TITLE	P	<input type="checkbox"/> Delete
NAME	<b>MAROONE MICHAEL E</b>	
STREET ADDRESS	<b>110 SE 6TH STREET, 20TH FLOOR</b>	
CITY-ST-ZIP	<b>FORT LAUDERDALE FL 33301</b>	
TITLE	DAS	<input type="checkbox"/> Delete
NAME	<b>SIMPSON JEFFREY K</b>	
STREET ADDRESS	<b>1201 MARKET ST., STE. 1700 CHASE MANHATTAN</b>	
CITY-ST-ZIP	<b>WILMINGTON DE 19801</b>	
TITLE	CAS	<input type="checkbox"/> Delete
NAME	<b>STEWART GORDON</b>	
STREET ADDRESS	<b>1201 MARKET ST., STE. 1700 CHASE MANHATTAN</b>	
CITY-ST-ZIP	<b>WILMINGTON DE 19801</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BOURHIS MARC L</b>	
STREET ADDRESS	<b>110 SE 6TH STREET, 20TH FLOOR</b>	
CITY-ST-ZIP	<b>FORT LAUDERDALE FL 33301</b>	
TITLE	DVS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FERRANDO JONATHAN P</b>	
STREET ADDRESS	<b>110 SE SIXTH STREET</b>	
CITY-ST-ZIP	<b>FT LAUDERDALE FL 33301</b>	
TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MAROONE MICHAEL E</b>	
STREET ADDRESS	<b>110 SE SIXTH STREET</b>	
CITY-ST-ZIP	<b>FT LAUDERDALE FL 33301</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

04/27/2000