

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000006734

1. Entity Name

AUTONATION LM HOLDING CORPORATION

FILED

00 JUL 13 PM 1:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

110 SE 6TH ST., 20TH FLOOR
FORT LAUDERDALE FL 33301

Mailing Address

110 SE 6TH ST., 20TH FLOOR
FORT LAUDERDALE FL 33301

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0723608

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: CAS Delete
NAME: STEWART, GORDON
STREET ADDRESS: 1201 MARKET ST., STE. 1700 CHASE MANHATTAN
CITY-ST-ZIP: WILMINGTON DE 19801

TITLE: Change Addition
NAME: 300003351603--7
STREET ADDRESS: -08/09/00--01110--012
CITY-ST-ZIP: *****61.25 *****61.25

TITLE: DAS Delete
NAME: SIMPSON, JEFFREY K
STREET ADDRESS: 1201 MARKET ST., STE. 1700 CHASE MANHATTAN
CITY-ST-ZIP: WILMINGTON DE 19801

TITLE: Change Addition
NAME: Change Addition
STREET ADDRESS: Change Addition
CITY-ST-ZIP: Change Addition

TITLE: P Delete
NAME: MAROONE, MICHAEL E
STREET ADDRESS: 110 SE 6TH ST., 20TH FLOOR
CITY-ST-ZIP: FORT LAUDERDALE FL 33301

TITLE: PD Change Addition
NAME: MAROONE, MICHAEL E.
STREET ADDRESS: 110 SE 6TH STREET, 20TH FLOOR
CITY-ST-ZIP: FT. LAUDERDALE, FL 33301

TITLE: VS Delete
NAME: COLE, JAMES O
STREET ADDRESS: 110 SE 6TH ST., 20TH FLOOR
CITY-ST-ZIP: FORT LAUDERDALE FL 33301

TITLE: VSD Change Addition
NAME: FERRANDO, JONATHAN P.
STREET ADDRESS: 110 SE 6TH STREET, 20TH FLOOR
CITY-ST-ZIP: FT. LAUDERDALE, FL 33301

TITLE: T Delete
NAME: HYLE, KATHLEEN
STREET ADDRESS: 110 SE 6TH ST., 20TH FLOOR
CITY-ST-ZIP: FORT LAUDERDALE FL 33301

TITLE: T Change Addition
NAME: BOURHIS, MARC L.
STREET ADDRESS: 110 SE 6TH STREET, 20TH FLOOR
CITY-ST-ZIP: FT. LAUDERDALE, FL 33301

TITLE: Delete
NAME: Delete
STREET ADDRESS: Delete
CITY-ST-ZIP: Delete

TITLE: Change Addition
NAME: Change Addition
STREET ADDRESS: Change Addition
CITY-ST-ZIP: Change Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
JONATHAN P. FERRANDO

7/7/2000

954 769 7226

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)