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Apr 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H29510 (5)

1. Corporation Name
PRESTIGE MOTORCAR GALLERY, INC.

Principal Place of Business

3112 W. TENNESSEE ST.
TALLAHASSEE FL 32304

Mailing Address

3112 W. TENNESSEE ST.
TALLAHASSEE FL 32304-2729

3. Date Incorporated or Qualified
11/09/1984

3a. Date of Last Report
04/26/1996

2. Principal Place of Business

3355 Capital Circle N.
Tallahassee, FL 32308

2a. Mailing Address

3355 Capital Cir. N.E.
Tallahassee, FL 32308

4. FEI Number

59-2495780

Applied For

Not Applicable

22. City & State

Tallahassee, FL

27. City & State

Tallahassee, FL

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23. Zip Country

32308

28. Zip Country

32308

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HORNSBY, M. CRAIG
3112 W. TENNESSEE ST
TALLAHASSEE FL 32034

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME HORNSBY, M. CRAIG
STREET ADDRESS 3112 W. TENNESSEE ST
CITY-ST-ZIP TALLAHASSEE FL

TITLE S
NAME COYNER, DEANA M.
STREET ADDRESS 2051 LONGVIEW DRIVE
CITY-ST-ZIP TALLAHASSEE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE S
22 NAME Les C. King
23 STREET ADDRESS 2929 Edenderry Drive
24 CITY-ST-ZIP Tallahassee, FL 32308

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET 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 changed, or on an attachment with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-97

904-297-1488

Date

Daytime Phone

CR2E034 (9/96)