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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Apr 18 1996 8:00 am
Secretary of State

DOCUMENT # J83185 (5)

1. Corporation Name

SELECT AUTO AUCTION, INC.

Principal Place of Business

2870 ELECTRONICS DR
MELBOURNE FL 32935
US

Mailing Address

PO BOX 410106
MELBOURNE FL 32941-0106
US

2. Principal Place of Business

2a. Mailing Address

21 2870 ELECTRONICS DR

26 PO BOX 410106

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 MELBOURNE, FL 32935

28 MELBOURNE, FL 32941

Zip

Country

Zip

Country

24 32935

25 BREVARD

29 32941-0106

30 BREVARD

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PEPPER, SUSAN
2870 ELECTRONICS DR.
MELBOURNE FL 32935

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 607.0508, 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]
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when registering)

4-15-96
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PD
PEPPER, SUSANN
STREET ADDRESS 2870 ELECTRONICS DR.
CITY-ST-ZIP MELBOURNE FL

TITLE ☐ DELETE

NAME VST
PEPPER, SUSANN
STREET ADDRESS 2870 ELECTRONICS DR.
CITY-ST-ZIP MELBOURNE FL

TITLE ☐ DELETE

NAME ☐ DELETE

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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]
Signature and typed or printed name of signing officer or director

4-15-96

Date

407-242-1833

Daytime Phone #

CR2E034 (12/95)