.2001 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # K27034** 1. Entity Name SHAMROCK CHEVROLET, INC. Principal Place of Business Mailing Address 5925 HWY. 90 WEST 950 ECHO LANE. SUITE 100 MILTON FL 32583 HOUSTON TX 77024 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number 59-2894916 Country Zip Country Zip 5. Certificate of Status Desired

FILED May 11, 2001 8:00 am Secretary of State

05-11-2001 90079 023 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Not Applicable

							se moquirei	
	6. Name and Address of Current F	legistered Agent	-	7. N	lame and Address of New	Registered Ag	jent	
0.74		Name						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			Street Address (P.O. Box Number is Not Acceptable)					
			City			FL	Zip Code	Э
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								
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FE				00	10. Election Campaign I	=inancina	\$5.0	O Mav Be
	requirement and elects to do so.		Attan MAV 1 2001 Eac will be REED OD			tion.		to Fees
11. OFFICERS AND DIRECTORS					DITIONS/CHANGES TO O	FFICERS AND D	DIRECTORS	3 IN 11
TITLE	P	Delete	12.	Ρ			Change	Addition
NAME	BASHAM, BYRON H	Da Ducto	NAME	Randy	Callison			
STREET ADDRESS	101 COUNTRY CLUB DRIVE WEST	•	STREET ADDRESS	1950 E	cho Lane, St	e.100		
CITY-ST-ZIP	DESTIN FL 32541		CITY-ST-ZIP		סדר את חום			
TITLE		☐ Delete	TITLE	VID			Change	X Addition
NAME			NAME	Scott L	Thompson			
STREET ADDRESS			STREET ADDRESS	950 Ect	o Lane', Steil	00		
CITY-ST-ZIP			CITY-ST-ZIP	Housto				
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NAME			NAME	J. Brook	ks O'Harq	1		
STREET ADDRESS			STREET ADDRESS	1950 EC	tho Lane, Ste	100		
CITY-ST-ZIP			CITY-ST-ZIP	Housto	M, TX 7700	<u> </u>		
TITLE		☐ Delete	TITLE			[Change	☐ Addition
NAME			NAME					
STREET ADDRESS		1	STREET ADDRESS	}				}
CITY-ST-ZIP			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 receivere or trustee empowered to expect this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter or an attachment with an address, with all objective monowered.								

SIGNATURE:

cott L. Thompson 4/19/01