FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **K87235** **(3)**

1. Corporation Name

DELAND JEEP/EAGLE, INC.

Principal Place of Business

2310 SO WOODLAND BLVD
DELAND FL 32720
US

Mailing Address

PO BOX 1900
DELAND FL 32721-1900
US

3. Date Incorporated or Qualified: **05/10/1989**

3a. Date of Last Report: **04/24/1995**

4. FEI Number: **59-2951106** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

2. Principal Place of Business

21
22 Suite, Apt. #, etc.
23 City & State
24 Zip 25 County

2a. Mailing Address

26
27 Suite, Apt. #, etc.
28 City & State
29 Zip 30 County

9. Name and Address of Current Registered Agent

GARBIG TERRY A
2322 S WOODLAND BLVD
DELAND FL 32720

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 617.1505, 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

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	SULLIVAN, ART	
STREET ADDRESS	6700 SE S. MARINA WAY	
CITY-ST-ZIP	STUART FL	
TITLE	V	☐ DELETE
NAME	WATTS, BOBBY L	
STREET ADDRESS	1236 FEATHER DR	
CITY-ST-ZIP	DELTONA FL	
TITLE	ST	☐ DELETE
NAME	BOSTIC, WANDA	
STREET ADDRESS	9515 SW 9TH PL	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	D	☐ DELETE
NAME	GARBIG, TERRY A.	
STREET ADDRESS	2615 SPRING VALLEY CR.	
CITY-ST-ZIP	DELAND FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE		☐ Change ☐ Addition
2 NAME		
3 STREET ADDRESS		
4 CITY-ST-ZIP		
5 TITLE		☐ Change ☐ Addition
6 NAME		
7 STREET ADDRESS		
8 CITY-ST-ZIP		
9 TITLE		☐ Change ☐ Addition
10 NAME		
11 STREET ADDRESS		
12 CITY-ST-ZIP		
13 TITLE		☐ Change ☐ Addition
14 NAME		
15 STREET ADDRESS		
16 CITY-ST-ZIP		
17 TITLE	Director	☐ Change ☑ Addition
18 NAME	Barbara Sullivan	
19 STREET ADDRESS	220 Osceola Way	
20 CITY-ST-ZIP	Palm Beach FL 33480	
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is accurate, and that such information complies with the requirements of Section 119.07(5)(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 added to the report with my address.

SIGNATURE: Bobby Watts 4/1/96 904-734-7800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone Number

Bobby Watts

CR2E034 (12/95)