


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2004 08:00 AM
Secretary of State

DOCUMENT # K87235 1. Entity Name DELAND JEEP, INC.	
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Principal Place of Business 2310 SO WOODLAND BLVD DELAND, FL 32720 US	Mailing Address PO BOX 1900 DELAND, FL 32721-1900 US
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03182004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2951106	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

GARBIG TERRY A
2322 S WOODLAND BLVD
DELAND, FL 32720

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000099292
03/30/04-800008-017 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SULLIVAN, ART 246 MONTEREY RD PALM BCH, FL 33480
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BOSTIC, WANDA 10609 SW 12 TERRACE MICANOPY, FL 32667
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARBIG, TERRY A. 800 E HWY 318 CITRA, FL 32113
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SULLIVAN, BARBARA 220 OSCEOLA WAY PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, CHRIS 2025 SW 112 STREET GAINESVILLE, FL 32607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 607, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Wanda Bostic
Wanda Bostic
ST

3/19/04
Date

386-734-7800
Daytime Phone #