FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L75442

(8)

BARTOW CHEVROLET COMPANY, INC.

FILED Apr 23 1997 8:00am Secretary of State

C/O SHIEST N 1100 SOLTH O BARTOW FL 33	RANGE AVENUE	C/O ERNEST M. SMITH 1190 SOUTH-GRANDS AVE BARTOW FL 33830-6519	COBIN K NUE	Wikm	3. Date Incorporated	or Qualified	3a. Date	e of Last R	teport	
					05/23/1990			04/23/1996		
	lace of Business	2a. Mailing Address		ct. +	4. FEI Number		<u></u>	[]Ar	oplied For	
	W. MAIN STreet	26 1475 W. W	1ain	2 weel	59-3009037			No	ot Applicable	
Sulte, Apt.	#. etc.	Suite. Apt. #, etc.			5. Certificate of Status Desired Fee Requ					
City & State	е	City & State			6. Election Campaign Financing \$5.00 May 8 Trust Fund Contribution Added to Fees					
Zip 24	Country 25	Zip Country 30			This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No					
	9. Name and Address of Current	Registered Agent			10. Name and Addres	s of New Reg	istered A	gent		
HODIN C HIDNING					ret Address (P.O. Box Number is Not Acceptable) 110 Lake POINT Drive Lake Aval FL 85 Zip Code 33813					
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 agont, 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 familter with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if agricable. (NOTL: Fingistered Agent signature required when reinstating) DATE										
12.	OFFICERS AND		13.		ADDITIONS/CHANG	ES TO OFFIC	ERS AND I	DIRECTOR	RS IN 12	
TITLE	ST	DELETE	1,1 TITLE				7	Change	Addition	
NAME	WICKMAN, JANET S.		1.2 NAME			+ Dr.				
STREET ADORESS	-6028-SOURWOOD WAY		1 3 STREET	ADDRESS //	110 Lake Point Lakeland, FL	000.	,		li	
CITY-ST-ZIP	BARTOW FL		1.4 CITY - S	1-21P L	_akeland, Th	3387	<u> </u>			
TITLE	DP	☐ DELETE	2.1 TITLE				Į	Change	Addition	
NAME	WICKMAN, ROBIN L.		2.2 NAME		un . t. fai	· · t Dri	υè			
STREET ADDRESS	8028 SOURWOOD WAY BARTOW FL		2.3 STREET	ADDRESS /	110 Late Poi Lateland FL	n . v	8/3			
CITY-ST-ZIP TITLE	DARIONTE	DELETE	2. 4 CITY-: 3.1 TITLE	S1-ZIP	Lacelana 7 L			Change	Addition	
NAME	II.	otter	3.2 NAME				L		Addition	
STREET ADDRESS			3.3 STREET	ADDRESS						
CITY-ST-ZIP			3.4. CITY-	* }						
TITLE		DELETE	4.1 TITLE					Change	Addition	
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET	ADDRESS					}	
CITY-ST-ZIP			4.4 CITY - S	1 - ZIP					1	
TITLE		DELETE	5.1 TITLE					Change	☐ Addition	
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET	ADDRESS						
CITY-ST-ZIP			5.4 CITY - S	T - ZIP		, <u></u>	· · · · <u>-</u>			
TITLE		☐ DELETE	6.1 TITLE					Change	☐ Addition	
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET	\ \						
CITY-ST-ZIP			64 CITY-S	T-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.

2-12.9.7 944:533-0777