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

FILED Apr 28 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # L75442 (8)BARTOW CHEVROLET COMPANY, INC. Principal Place of Business Mailing Address 1475 W. MAIN ST 1475 W. MAIN ST. BARTOW FL 33830-6519 BARTOW FL 33830-6518 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/23/1990 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 59-3009037 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Zip. Country 8. This corporation owes or has paid the current year intangible ☐ Yes ∏ No 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ROBIN L. WICKMAN 1110 LAKE POINT DR. 82 Street Address (P.O. Box Number is Not Acceptable) **LAKELAND FL 33813** 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 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. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition 1.1 TITLE TITLE ☐ Change WICKMAN, JANET S. 1.2 NAME 1110 LAKE POINT DR. STREET ADDRESS 1.3 STREET ADDRESS LAKELAND FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE WICKMAN, ROBIN L. 2.2 NAME NAME 1110 LAKE POINT DR. STREET ADDRESS 2.3 STREET ADDRESS LAKELAND FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE ☐ Addition TITLE NAME 3.2 NAME 3.3 STREET ADORESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIP Change DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

14. 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 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 appenhment with an address.

Change

Addition

SIGNATURE:

TITLE

NAME

STREET ADDRESS

DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

4-1-98