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

**PROFIT** CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT OF STATE

FILED

Apr 25 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

appears in Block 12

SIGNATURE

**DOCUMENT # L86439** 

(1)

REGENCY MOTORS ENTERPRISES. INC. Principal Place of Business Mailing Address **% DONALD BUSSIERE** S DOMALD RUSSIFRE 103 N VOLUSIA AVE 103 N VOLUSIA AVE **ORANGE CITY FL 32763** ORANGE CITY FL 32763-5101 3a. Date of Last Report 3. Date Incorporated or Qualified 07/02/1990 04/25/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-1988709 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zφ Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 30 Florida Statutes 🔀 Yes 🔲 No 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BUSSIERE, DONALD 103 N VOLUSIA AVE 82 Street Address (P.O. Box Number is Not Acceptable) **ORANGE CITY FL 32763** 83 84 City Zip Code 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 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, types) or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) DELETE Change Addition TITLE 1.1 TITLE NAME **BUSSIERE, DONALD** 1.2 NAME 103 N VOLUSIA AVE 1.3 STREET ADDRESS STREET ADDRESS **ORANGE CITY FL** CITY-ST 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIE DELETE Change ☐ Addition 3.1 TITLE 1-TLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST- ZIP CITY-ST-ZP DELETE Change Addition 41 TITLE 1000 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TULE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST- ZIE DELETE Change Addition 6.1 TITLE TILLE NAMS 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. Too 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

anged, or on an attachment with an address.