


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

FILED  
Jun 19 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **187164** (4)  
1. Corporation Name  
**BUDDY FOSTER CHEVROLET OF DADE CITY, INC.**

Principal Place of Business Mailing Address  
**307 N 7TH ST P O BOX 1875**  
**DADE CITY, FL 33525 DADE CITY, FL 33526**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 Suite, Apt. #, etc.		28 Suite, Apt. #, etc.		07/12/1990	3/31/96
22 City & State		27 City & State		4. FEI Number	Applied For
23 Zip		29 Zip		59-3018377	Not Applicable
24 Country		30 Country		5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
<b>FOSTER, HARRY M</b> <b>1047 ROYAL PASS ROAD</b> <b>TAMAP FL 33606</b>				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	<b>FL</b>
				85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FOSTER, HARRY M</b>	1.2 NAME	
STREET ADDRESS	<b>29302 WHIPPOORWILL LANE</b>	1.3 STREET ADDRESS	<b>1047 ROYAL PASS ROAD</b>
CITY-ST-ZIP	<b>WESLEY CHAPEL FL</b>	1.4 CITY-ST-ZIP	<b>TAMPA, FL 33606</b>
TITLE	VST	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PASKERT, GEORGE H</b>	2.2 NAME	
STREET ADDRESS	<b>212 S HERPERIDES STREET</b>	2.3 STREET ADDRESS	<b>TAMPA FL 33609</b>
CITY-ST-ZIP	<b>TAMPA FL 33609</b>	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	<b>000002218190</b>
STREET ADDRESS		5.3 STREET ADDRESS	<b>--06/20/97--01027--036</b>
CITY-ST-ZIP		5.4 CITY-ST-ZIP	<b>***165.00</b>
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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.

SIGNATURE: George H Paskert **GEORGE H PASKERT** (813-782-1538)  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR OF CORPORATION  
Date Daytime Phone #

CR2E034 (9/96)