APPROVEL

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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M60723

WALLACE DODGE, INC.

99 FEB 12 PM 4: 00 SECRETARY OF STATE TALLAHASSEE, FLORIDA A CARLACTURISE SUMU ADMIR LABOR TUDAS UM BIRAN ADMIR ADMIR ADMIR ATMIR ADMIR CARD

							(8)) 6)8) 8(8) (83)			
Principal Place	e of Business	Mailing Address			i radiadis in ellis abits sana sinae tili nibit i	)(#14 <b>0</b> (#11 0	1831 A1811 A1811 1881			
1-95 & LINTON P.O. BOX 9002 DELRAY BEACH		110 S.E. SIXTH ST STE 1200 FT LAUDERDALE FL 33301		DO NOT WRITE IN THIS SPACE						
US		US			<ol> <li>Date Incorporated or Qualifed</li> <li>10/13/1987</li> </ol>					
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For	1		
21		26			65-0014147		Not Applicable			
Suite, Apt.	#, etc.		or		5. Certificate of Status Desired [ ]		5 Additional Required			
City & State	е	City & State			6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees			
Zip	Country	Zip	Country	/	8. This corporation owes the current year In	tangible				
24	25	29 3	0		Personal Property Tax.	Yes	DNo			
	9. Name and Address of Current	Registered Agent		····	10. Name and Address of New Registered	Agent		_		
CT C	CORPORATION SYSTEM		[81	Name						
1200	S PINE ISLAND RD		82	Street Add	ress (P.O. Box Number is Not Acceptable)		<i>-</i>			
PLAN	NTATION FL 33324		83					]		
			84	L	FL	_	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										
	Signature, typed or printed name of registered agent			nt signature requir	ed when reinstating) DATE			- j		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIREC		} {		
TITLE	P MALL AOP MOULEMAN	el Deceie	1.1 TITLE			∐ Char	ige [] Addition	3		
NAME	WALLACE, WILLIAM L.		1.2 NAME		see attachment			1 3		
STREET ADDRESS	LINTON BLVD. & I-95	/		1 ADDRESS	2675 oct 1012 11187 11			Ì		
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TITLE	•	E pereie	1	1			-	1		
NAME	SMITH, LEE LINTON BLVD. & 1-95		2 2 NAME.		000002776	71	02	,		
STREET ADDRESS	DELRAY BEACH FL	/		1 ADDRESS	-02/16/990	11034	023	}		
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	FT LAUDERDALE FL 33301		4	1				-		
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NAME			4.2 NAME	}		_ 0	a	-		
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NAME			52 NAME				g	1		
			53 STREET ADORESS		1 h.			}		
STREET ADDRESS	FT LAUDERDALE FL 33301		5 4 CiTY-5		10/2/10			}		
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			1	T ADDRESS	I			1		
STREET ADDRESS			64 CITY-5					1		

64 CITY-\$1-ZP

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 of 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, of on an attachment with an address, with ellipse the empowered.

SIGNATURE:

## Wallace Dodge, Inc.

OFFICE		NAME
Directors		Thomas W. Hawkins
	***************************************	James O. Cole
President	***************************************	William L. Wallace
Chief Finan	cial Officer	Lee Smith
Vice Preside	ents	Lee Smith
	***************************************	James O. Cole
Secretary	*************	James O. Cole
Treasurer	************	Kathleen Hyle

Address for all officers and directors is:

110 SE 6<sup>th</sup> Street, 20<sup>th</sup> Floor Fort Lauderdale, Florida 33301