## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000002931

FILED Feb 13, 2009 Secretary of State

Entity Name: FIRST COAST BUICK, PONTIAC, GMC TRUCK DEALER GROUP, INC.

Current Principal Place of Business: New Principal Place of Business:

2445 S.E. FEDERAL HIGHWAY STUART, FL 34994 US

Current Mailing Address: New Mailing Address:

2445 S.E. FEDERAL HIGHWAY STUART, FL 34994 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KURKIN, ALEX ESQ. 4300 BISCAYNE BOULEVARD SUITE 305 MIAMI, FL 33137 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P ( ) Delete Title: DP (X) Change ( ) Addition

 Name:
 MORGAN, JERRY
 Name:
 MORGAN, JERRY

 Address:
 2250 US HIGHWAY 1 SOUTH
 Address:
 2250 US HIGHWAY 1 SOUTH

 City-St-Zip:
 ST. AUGUSTINE, FL 32086 US
 City-St-Zip:
 ST. AUGUSTINE, FL 32086 US

Title: VP ( ) Delete Title: DVP (X) Change ( ) Addition Name: NIMNICHT, BILLIE Name: NIMNICHT, BILLIE

Address: 11503 PHILIPS HIGHWAY
City-St-Zip: JACKSONVILLE, FL 32256 US
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: S, T () Delete Title: DST (X) Change () Addition

Name: NIMNICHT, ED Name: NIMNICHT, ED

Address: 11503 PHILIPS HIGHWAY Address: 11503 PHILIPS HIGHWAY
City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip: JACKSONVILLE, FL 32256 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERRY MORGAN DP 02/13/2009