


FILE NOW: FILING FEE IS \$61.25

FILED
Aug 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # **N96000000234 (2)**

1. Corporation Name

HOMETOWN GMC DEALERS MARKETING ASSOCIATION, INC.



Principal Place of Business 3122 MAHAN DRIVE TALLAHASSEE FL 32308	Mailing Address 3122 MAHAN DRIVE TALLAHASSEE FL 32308-5508
---	--

3. Date Incorporated or Qualified 01/16/1996	3a. Date of Last Report
--	-------------------------

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

4. FEI Number 59-3443658	Applied For <input type="checkbox"/> Not Applicable
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 type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent PROCTOR, W. THEO JR. 3122 MAHAN DRIVE TALLAHASSEE FL 32308	
--	--

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	PROCTOR, W. THEO JR.
STREET ADDRESS	3122 MAHAN DRIVE
CITY-ST-ZIP	TALLAHASSEE FL 32308
TITLE	VPD <input type="checkbox"/> DELETE
NAME	THOMAS, BRUCE
STREET ADDRESS	P. O. BOX 350 N/A
CITY-ST-ZIP	QUINCY FL 32353
TITLE	ST <input type="checkbox"/> DELETE
NAME	PUTNEY, LOUISE
STREET ADDRESS	3122 MAHAN DRIVE
CITY-ST-ZIP	TALLAHASSEE FL 32308
TITLE	D <input type="checkbox"/> DELETE
NAME	MILLER, LOU
STREET ADDRESS	P. O. BOX 88 N/A
CITY-ST-ZIP	THOMASVILLE GA 32789
TITLE	D <input type="checkbox"/> DELETE
NAME	KIRKSEY, DON
STREET ADDRESS	P.O. BOX 1760 N/A
CITY-ST-ZIP	BAINBRIDGE GA
TITLE	D <input type="checkbox"/> DELETE
NAME	BOSCH, BART
STREET ADDRESS	P. O. BOX 2478 N/A
CITY-ST-ZIP	VADOSTA GA 31804

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)