FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000001742 (2)

PALM COAST CHEVROLET DEALER MARKETING GROUP, INC

FILED Feb 09 1998 8:00am Secretary of State

•					
Principal Plac	ce of Business	Mailing Address			
5757 LAKE WORTH RD 5757 LAKE WORTH RD					3. Date Incorporated or Qualified
GREENACRES		GREENACRES FL 33466-99	500		03/26/1997
					4. FEI Number Applied For
1					59 3450256 Not Applicable
<u> </u>	Place of Business	2a. Mailing Address			5. Certificate of Status Desired \$8.75 Additional
21		26			Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			8. Election Campaign Financing \$5.00 May Be
City & Stat		City & State			Trust Fund Contribution
23	•	28 28			7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No
Zip	Country	Zip	Count	try	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	ant Registered Agent			10. Name and Address of New Registered Agent
			8	31 Nar	Name
	, STEPHEN C		8	32 Stre	Street Address (P.O. Box Number is Not Acceptable)
	KE WORTH RD		<u> </u>	_	
GREENA	ACRES FL 33466-9500		٥	33	
			8	34 City	City 85 Zip Code
11 Durenant	to the provisions of Sections 617 Of	502 and 617 1508 Florida Statut	toe the abo		Pared corporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the State	te of Florida. Such change was	authorized	by the	named corporation submits this statement for the purpose of changing its registered ne corporation's board of directors. I hereby accept the appointment as registered
	m familiar with, and accept the obii	gations of, Section 617.0503, in	orida Statut	es.	
SIGNATURE .	Signature, typed or printed name of registered a	agent and title if applicable. (NOT	E: Registered /	Agent sign	signature required when reinstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Ď	☐ DELETE	1.1 TITLE	E	☐ Change ☐ Addition
NAME	D EAN, PATTY		1.2 NAM	iΕ	
STREET ADORESS	2235 OKEECHOBEE BLVD		1.3 STRE	EET ADDRE	ORESS
CITY-ST-ZIP	WEST PALM BEACH FL 334			-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	JOCHEM, JOHN		2.2 NAM		
STREET ADDRESS	2650 S FEDERAL HWY			EET ADDRES	
CITY-ST-ZIP	8TUART FL 34994	XX DELETE		/-SI-ZIP	ZIP Change Addition
TITLE	D EDONOATH DENNIS	VW1 percue	3.1 TITLE		. Civilina Civilina
NAME STREET ADDRESS	FRONRATH, DENNIS 310 S EAST 5TH AVE		3.2 NAM		INDEAN
CITY-ST-ZIP	DELRAY BEACH FL 33447			eet addre: Y-St-Zip	
TITLE	D DELINI DENOTITE 3347	☐ DELETE	4.1 TITLE		Change Addition
NAME	MOORE, STEPHEN C		4. 2 NAM		
STREET ADDRESS	5757 LAKE WORTH RD			EET ADORES	nress :
CITY-ST-ZIP	GREENACRES FL 33463		4.4 CITY		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ALBERTSON, RONALD D		5.2 NAMI	E	05 vas
STREET ADDRESS	1700 E PALM BEACH RD		5.3 STRE	ET ADDRES	DRESS
CITY-ST-ZIP	BELLE GLADE FL 33430		5.4 CITY	· ST-ZIP	
TITLE	D	☐ DELETE	6.1 TITLE		□□□□□□□□□□ Addition
NAME	SCHULTZ, WILLIAM		6.2 NAMI	E	-02/10/9801037025
STREET ADDRESS	4200 S US HWY 1		6.3 STRE	et addres	DRESS ****61.25
l	ET DICOCE EL 64040				

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 angular apport 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 eceiver or tystee 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.

nnunw: 22 1000 EC1 422 ETE