

FILE NOW: FILING FEE IS \$61.25

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Feb 12 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000003074 (8)**

1. Corporation Name

**SOUTHERN CHEVY DEALERS, INC.**

Principal Place of Business

Mailing Address

**101 SOUTHALL LANE  
SUITE 400  
MAITLAND FL 32751  
FL**

**101 SOUTHALL LANE  
SUITE 400  
MAITLAND FL 32751  
FL**

2. Principal Place of Business

2a. Mailing Address

**21** Suite, Apt. #, etc.

**26** Suite, Apt. #, etc.

**22** City & State

**27** City & State

**23** Zip

Country

**28** Zip

Country

**24**

**25**

**29**

**30**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**05/28/1997**

4. FEI Number

**59-3450256**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$6.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

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

**PALMETTO CHARTER SERVICES INC.  
150 MAGNOLIA AVE.  
P.O. BOX 2491  
DAYTONA BEACH FL 32115-2491**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>	<input type="checkbox"/> DELETE
NAME	<b>RICHEY, GLENN</b>	<b>RITCHEY</b>
STREET ADDRESS	<b>551 NORTH NOVA ROAD</b>	<b>BEACH</b>
CITY-ST-ZIP	<b>DAYTONA BEACH FL 32114</b>	

TITLE	<b>VD</b>	<input type="checkbox"/> DELETE
NAME	<b>MOORE, STEVE</b>	
STREET ADDRESS	<b>5757 LAKE WORTH ROAD</b>	
CITY-ST-ZIP	<b>GREENACRES FL 33463</b>	

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>ELLIOTT, BOB</b>	
STREET ADDRESS	<b>205 N CHARLESTON AVE</b>	
CITY-ST-ZIP	<b>FT MEADE FL 33841</b>	

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>GOMEZ, EDDIE</b>	
STREET ADDRESS	<b>9751 ADAMO DRIVE</b>	
CITY-ST-ZIP	<b>TAMPA FL 33619</b>	

TITLE	<b>STD</b>	<input type="checkbox"/> DELETE
NAME	<b>MEAGHER, MIKE</b>	
STREET ADDRESS	<b>2801 34TH SAT NORTH</b>	
CITY-ST-ZIP	<b>ST PETERSBURG FL</b>	

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>LAYNE, RONNIE</b>	<b>LAYNE</b>
STREET ADDRESS	<b>101 S.W. PINE ISLAND RD</b>	
CITY-ST-ZIP	<b>CAPE CORAL FL 33991</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>See attached</b>
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 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 in an attachment with an address. **GLORIA M. SAMPSON**

SIGNATURE: **Gloria M. Sampson, Executive Director 1-27-98 (407) 660-6661**

CP2E037 (1097)



**JANUARY 6, 1998**

**PLEASE ADD THE FOLLOWING TO THE SOUTHERN CHEVY DEALERS, INC.  
DIRECTORS LIST:**

**Lou Bachrodt, III**  
Lou Bachrodt Chevrolet, Inc.  
1801 W. Atlantic Boulevard  
Pompano Beach, Florida 33069-2799

**Walt Bennett**  
Bennett Chevrolet Buick, Inc.  
1974 Highway 40 East  
Kingsland, GA 31548-1389

**Bill Cramer, Jr.**  
Tommy Thomas Chevrolet, Inc.  
2251 West 23rd Street  
Panama City, FL 32405-0490

**Gene Fury**  
Potamkin Chevrolet  
16600 N.W. 57th Avenue  
Hialeah, FL 33014-6199

**Ken Graham**  
Maroone Chevrolet, Inc.  
8600 Pines Boulevard  
Pembroke Pines, FL 33024-6534

**Kevin Mealey**  
Don Mealey Chevrolet, Inc.  
3707 West Colonial Drive  
Orlando, FL 32808-5688

**George Moore**  
George Moore Chevrolet, Inc.  
711 Beach Boulevard  
Jacksonville Beach, FL 32250-0159

**Norm Scoggins**  
Scoggins Chevrolet-Olds-Buick, Inc.  
1424 North Young Boulevard  
Chiefland, Florida 32626-0920

**Bill Shultz**  
Bill Shultz Chevrolet, Inc.  
4200 South U.S. # 1  
Ft. Pierce, FL 34982-4322

**Larry Strom**  
Champion Chevrolet  
3127 W. Tennessee Street  
Tallahassee, FL 32304