

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

FILED
May 14 1998 8:00am
Secretary of State

DOCUMENT # **N97000006642 (9)**

1. Corporation Name

PROFESSIONAL VEHICLE DEALERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

**6340 49TH ST. NORTH
PINELLAS PARK FL 33781**

**6340 49TH ST. NORTH
PINELLAS PARK FL 33781**

3. Date Incorporated or Qualified

11/24/1997

4. FEI Number

Applied For

☒ Not Applicable

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

10. Name and Address of New Registered Agent

**PARMELEE, JD
6340 49TH ST. NORTH
PINELLAS PARK FL 33781**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP** ☐ DELETE

NAME **BROWN, JAMES H**
STREET ADDRESS **3150 65TH ST. NO.**
CITY-ST-ZIP **ST. PETERSBURG FL 33701**

1.1 TITLE ☐ Change ☐ Addition

TITLE **DS** ☐ DELETE

NAME **PARMELEE, AUDREY**
STREET ADDRESS **5725 80TH ST. NO. #103**
CITY-ST-ZIP **ST. PETERSBURG FL 33709**

1.2 NAME ☐ Change ☐ Addition

TITLE **DT** ☐ DELETE

NAME **MILLER, DAVID**
STREET ADDRESS **3430 N. LAKE SHORE, DR. 9N**
CITY-ST-ZIP **CHICAGO IL 60657**

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

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 on an attachment with an address.

SIGNATURE:

James H. Brown

5-1-98

3150 65th St. No.

CR2E037 (10/97)