

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 19, 2004 8:00 am**  
**Secretary of State**

03-19-2004 90026 008 \*\*\*\*61.25

<b>DOCUMENT # N98000000938</b>					
<b>1. Entity Name</b> SOUTHEAST DODGE TRUCK DEALERS ADVERTISING ASSOCIATION II, INC.					
<b>Principal Place of Business</b> 4175 CHRYSLER DRIVE MEMPHIS, TN 38118-7018			<b>Mailing Address</b> BEHAR, REID, GREEN & MELTON, CPA 4 BRADLEY PARK COURT SUITE #120 COLUMBUS, GA 31904 US		
<b>2. Principal Place of Business</b> 14131 Midway Rd Ste 800		<b>3. Mailing Address</b>			
Suite, Apt. #, etc. Addison		Suite, Apt. #, etc.			
City & State TX		City & State			
Zip 75001		Country USA		Zip	
Country		Zip		Country	
<b>4. FEI Number</b> 58-2372634					
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>					
<b>6. Name and Address of Current Registered Agent</b> HUDOCK, LESLIE WAGER 601 BAYSHORE BLVD. SUITE 700 TAMPA, FL 33606			<b>7. Name and Address of New Registered Agent</b>		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			City		
State			State		
Zip Code			Zip Code		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
<b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when reinstating)					
<b>Filing Fee is \$61.25 Due by May 1, 2004</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	C GRAY, VAN CHRYLER CORP. 2205 BELT LINE RD. CARROLLTON, TX 75006	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	C Gray, Van DaimlerChrysler Corp., 14131 Midway Rd, Ste 800 Addison, TX 75001	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	D WILSON, DOUG 4200 LAKELAND DRIVE JACKSON, MS 39204	<input checked="" type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	D Rogers, Denny 1330 E. Bert Kouns Ind. Loop Shreveport, LA 71105	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	D LEE, JOHN 541 MARY ESTER CUTOFF FT. WALTON, FL 32598	<input checked="" type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	D Favre, Jr., Otis 330 Howze Beach Road Slidell, LA 70461	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	D HELMS, STEVE 694 EAST CHURCH STREET LEXINGTON, TN 38351	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	D Hart, Larry 10535 Auto Mall Parkway Biloxi, MS 39532	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	D ROSS, TOM JR P.O. BOX 684 SENATOBIA, MS 38668	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	D Lopinto, Frank 9550 Airline Hwy. Baton Rouge, LA 70898	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	D MARTINDILL, BUTCH 5809 S. UNIVERSITY LITTLE ROCK, AR R22198904	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	D Lopinto, Frank 9550 Airline Hwy. Baton Rouge, LA 70898	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b> _____			3-15-04		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		