

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS**FILED**  
**Apr 26, 1999 8:00 am**  
**Secretary of State**

04-26-1999 90148 006 \*\*\*\*61.25

**DOCUMENT # N98000004697**

1. Corporation Name

**VOLUSIA COUNTY SUPER 2 TOYOTA DEALERS ASSOCIATIO  
N, INC.**

Principal Place of Business

C/O GEORGE FENDER  
1836 WOODWARD STREET  
ORLANDO FL 32803

Mailing Address

C/O GEORGE FENDER  
1836 WOODWARD STREET  
ORLANDO FL 32803

2. Principal Place of Business

21 c/o Sommers Everhart &amp; Kohler

Suite, Apt. #, etc.

22 380 Columbia Drive, Suite 111

City &amp; State

23 West Palm Beach, FL

Zip

24 33409

Country

25 USA

2a. Mailing Address

26 c/o Sommers Everhart &amp; Kohler

Suite, Apt. #, etc.

27 380 Columbia Drive, Suite 111

City &amp; State

28 West Palm Beach, FL

Zip

29 33409

Country

30 USA

3. Date Incorporated or Qualified

08/14/1998

4. FEI Number

59-3531488

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required6. Election Campaign Financing ☐

Trust Fund Contribution

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

9. Name and Address of Current Registered Agent

FENDER, GEORGE  
1836 WOODWARD STREET  
ORLANDO FL 32803

10. Name and Address of New Registered Agent

81 Name

Parks, S. Randall

82 Street Address (P.O. Box Number is Not Acceptable)

3505 North US Highway 17-92

83

84 City Longwood

FL

85 Zip Code

32752

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: *STEPHEN R. PARKS*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4.21.99

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DANNEHOWER, GILBERT

STREET ADDRESS 451 N. NOVA ROAD

CITY-ST-ZIP DAYTONA BEACH FL 32114

TITLE ☐ DELETE

NAME VSD

STREET ADDRESS 3505 N. U.S. HIGHWAY 1792

CITY-ST-ZIP LONGWOOD FL 32752

TITLE ☒ DELETE

NAME TD

STREET ADDRESS FENDER, GEORGE ASST-T

CITY-ST-ZIP 1836 WOODWARD STREET

ORLANDO FL 32803

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 2 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *STEPHEN R. PARKS*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)

0016855