## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P01591

(7)

HULL CHEVROLET, INC.

Principal Place of Business	Mailing Address				
8725 ARLINGTON EXPRESSWAY JACKSONVILLE FL 32211	8725 ARLINGTON EXPRESSWAY JACKSONVILLE FL 32211				
Principal Place of Business	2a Mailing Addrops				

**FILED** Mar 14 1996 8:00 am Secretary of State

3a. Date of Last Report 02/22/1995

3. Date Incorporated or Qualified 04/11/1984

21	. Mos or Eddingog	Za. Maining Address				48-0772068			Applied For
·	t # alc	26	Ant # etc			40-0//2000			Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired			\$8.75 Additional Fee Required	
City & State City & State 28			State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip	Country	Zip		Country		B. This corporation has liability for	or intangible !		***************************************
24 25 29 30						Florida Statutes	Yes [	Î No	
	9. Name and Address of Curr	ent Registered A	gent			10. Name and Address of New	Registered	Agent	
				81	Name				
Hull, Stephen L. 8725 Arlington Expwy				82	Street Addre	ess (P.O. Box Number is Not Accept	ahle)		
				"	O COC F ROSE	500 (* 101 20X 110 110 110 110 110 100 pt	2010)		
JACKS	ONVILLE FL 32211			83					741
				84	City				
1				64	City		FI	85 Zip	o Code
11. Pursuant	t to the provisions of Sections 617.05	02 and 617.1508, I	Florida Statutes, th	e above-n	amed corpora	ation submits this statement for the p	urpose of ch	nanoino its r	eaistered office
01 100,50	ered agent, or both, in the State of Flo vith, and accept the obligations of, Se	inua, ouch change	was antionzed by	the corpo	oration's board	d of directors. I hereby accept the ap	pointment a	s registered	agent. I am
SIGNATURE	, Sooopi wo obligations of, do	545.1511.0000,110	ANGE CIGIGIES.						
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable	(NOTE: Fle	gistered Agent	signature required	when reinstating)	DATE		
12.	OFFICERS A	ND DIRECTORS		13.		ADDITIONS/CHANGES TO O		D DIRECTO	RS IN 12
THEE	PD		DELETE	1.1 TITLE	5	EC., VP, AP		Change	Addition
NAME	HULL, STEPHEN L.			1.2 NAME		pancie X STMN	TUN	_ ,	~
STREET ADDRESS	8725 ARLINGTON EXPRSW	AY		1.3 STREET	ADDRESS 47	725 ARLING ET	person	44	
Crty-St-ZiP	JACKSONVILLE FL 3	2211		1.4 CITY - ST	1-7IP J	ACKEDNILLE , FL	322	. ij	
THLE	STD	B	DELETE	2.1 TITLE				Change	Addition
NAME	PERKINS, PIERRE	•	`	2.2 NAME					
STREET ADDRESS	8725 ARLINGTON EXPRSW	AY		2 3 STREET	ADDRESS				
CITY-ST-7IP	JACKSONVILLE FL			2 4 CITY-S					
TITLE	VP, D		DELETE	3.1 TITLE				Change	Addition
NAME	OVERTON, THOMAS	_		3 2 NAME					
STREET ADDRESS	8725 ARLINGTON EXPRSW	AY		3.3 STREET	ADDRESS -	-			
CITY - ST - ZIP	JACKSONVILLE FL 32	LII		3.4 CITY-S					
TITLE			DELETE	4.1 TITLE				Change	☐ Addition
NAME	1			4. 2 NAME					
STREET ADDRESS				4.3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY-ST	1				
TITLE		ſ	DELETE	51 TITLE	<u> </u>			Change	Addition
NAME		_		52 NAME				v.io.igo	
STREET ADDRESS				53 STREET	LODGESS				
CITY - ST - ZIP	}			5.4 CITY-ST	1				
TIFLE		Г	DELETE	6.1 TITLE &		3000017	4411	f Change	Addition
NAME		_		6.2 NAME	I	-03/15/9601	กรกักใ	15	- voortoll
STHEET ADDRESS				6.3 STREET		***70.00			
CITY-ST-ZIP			i i	o.s a incli /		,0100			
				6.4 CITY - ST	7(0				

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: FRANCIS X. STANTON JUNE X STANTON SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR