2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0200000110

Address:

City-St-Zip:

6960 KETTLE CREEK DR.

JACKSONVILLE, FL 32222

Entity Name: LAMAR WHITE AUTOMOTIVE, INC.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4030 CANAL ST JACKSONVILLE, FL 32209 **Current Mailing Address: New Mailing Address:** 4030 CANAL ST JACKSONVILLE, FL 32209 FEI Number: 26-0009286 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WHITE, WILLIAM LAMAR 6960 KETTLE CREEK DR JACKSONVILLE, FL 32222 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PCFO** () Delete Title: () Change () Addition WHITE, WILLIAM LAMAR Name: Name: 6960 KETTLE CREEK DR Address: Address: City-St-Zip: JACKSONVILLE, FL 32222 City-St-Zip: () Delete Title: VSD Title: () Change () Addition Name: WHITE, BELINDA Name: 6960 KETTLE CREEK DR Address: Address: JACKSONVILLE, FL 32222 City-St-Zip: City-St-Zip: Title: () Delete Title: AD () Change () Addition WHTIE, CHAUNA S Name: Name: 6960 KETTLE CREEK DR Address: Address: City-St-Zip: JACKSONVILLE, FL 32222 City-St-Zip: Title: () Delete Title: () Change () Addition WHITE, CHAUNA Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: BELINDA WHITE VSD 04/30/2004