2003 FOR PROFIT CORPORATION

P02000032917

UNIFORM BUSINESS REPORT (UBR)

1. Entity Name

DOCUMENT #



FILED

Secretary of State

May 01, 2003 8:00 am

05-01-2003 90792 042 ***158.75 CITY AUTOMOTIVE, O.P., INC. Principal Place of Business Mailing Address 7505 BLANDING BLVD. C/O CITY MITSUBISHI JACKSONVILLE FL 32244 10575 ATLANTIC BLVD. JACKSONVILLE FL 32225 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 01-0661772 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FOREHAND, WALTER E Street Address (P.O. Box Number is Not Acceptable) 125 S. GADSDEN ST., STE. 300 TALLAHASSEE FL 32301 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Defete TITLE DC Addition Bresnan, William NAME NAME STREET ADDRESS STREET ADDRESS One Manhattan Rd. CITY-ST-ZIP CHTY-ST-7IP Purchase, NY, 10577 ☐ Delete TITLE ☐ Change TITLE DΡ Galrani, John 10585 Atlantic Blvd. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Jacksonville, FL. 32225 Addition TITLE VT Migiano, Gragg 10585 Atlantic Blvd. ☐ Delete ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Jacksonville, FL. 32225 ς. ☐ Delete TITLE ☐ Change Addition TITLE Bresnan, Robert NAME NAME One Manhattanville Rd. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Purchase, NY, 10577 CITY-ST-ZIP Change Addition Delete TITLE Gislason, Paul NAME NAME 1505 squirrels NestRd. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Kasota, MN, 56050

Mankato, MN, 56001 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 607, 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

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

NAME

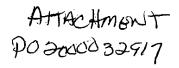
STREET ADDRESS

CITY-ST-ZIP

□ Delete

Derrolith, Donald

40 Hanten Dr.



CITY AUTOMOTIVE, O.P., INC. dba CITY MITSUBISHI-ORANGE PARK LIST OF OFFICERS & DIRECTORS

ADDITIONS TO SECTION 11 OF UNIFORM BUSINESS REPORT

Title:

D

Name:

Jeffrey S. DeMond

Street Address:

One Manhattanville Rd.

City, State & ZIP:

Purchase, NY 10577