

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90066 003 ***158.75

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P03809

1. Corporation Name
ISLAND LINCOLN-MERCURY, INC.



Principal Place of Business 1850 E MERRITT ISL CSWY MERRITT ISLAND FL 32952	Mailing Address 1850 E MERRITT ISL CSWY MERRITT ISLAND FL 32952
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	22	26	27	10/24/1984	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
23		28		59-2490755	
City & State		City & State		Applied For	
24		29		Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	
25	25	30	30	X \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
				\$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				8. This corporation owes the current year Intangible Personal Property Tax.	
DEARDOFF, R. BRUCE 509 E NASA BLVD MELBOURNE FL 32901				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DEARDOFF, R. BRUCE 509 E NASA BLVD MELBOURNE FL 32901				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL 85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEARDOFF, R. BRUCE	1.2 NAME	
STREET ADDRESS	509 E NASA BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32901	1.4 CITY-ST-ZIP	
TITLE	V <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FISHER, MARIE E.	2.2 NAME	
STREET ADDRESS	1850 E MERRITT ISL CSWY	2.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL 32952	2.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEARDOFF, MICHAEL G.	3.2 NAME	
STREET ADDRESS	1850 E MERRITT ISL CSWAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL 32952	3.4 CITY-ST-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHENEY, RENEE E	4.2 NAME	
STREET ADDRESS	1850 E. MERRITT ISLAND CSWY	4.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL 32952	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Joe Chavara
STREET ADDRESS		5.3 STREET ADDRESS	509 E. NASA Blvd.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Melbourne, FL 32901
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 1/11/99 407 956 0600

CR2E034 (11/98)