2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000041382

1. Entity Name

SOUTH FLORIDA ADVERTISING ASSOCIATION OF HONDA DEALERS, INC.



FILED
Jan 31, 2008 8:00 am
Secretary of State
01-31-2008 90027 041 ***150.00

Principal Place of Business

2699 STIRLING ROAD

SUITE B-206

FT. LAUDERDALE, FL 33312

Mailing Address

2699 STIRLING ROAD

SUITE B-206 FT. LAUDERDALE, FL 33312 US

No Cha-P

CR2E034 (11/05)

01242008 4. FEI Number

20-0831339

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SCHAIN, RONALD D 2699 STIRLING ROAD SUITE B-206

DO NOT WRITE IN THIS SPACE

FT. LAUDERDALE, FL 33312 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE LEMARE, RICK NAME 99500 OVERSEAS HIGHWAY STREET ADDRESS CITY - ST - ZIP KEY LARGO, FL 33037 SVP TITLE NAME CASE, RICK STREET ADDRESS 15700 RICKCASE HOR DR CITY - ST - ZIP **DAVIE, FL 33331** TITLE VΡ MOODY, LES NAME STREET ADDRESS 16165 S DIXIE HIGHWAY DO NOT WRITE CITY - ST - ZIP MIAMI, FL 33157 IN THIS SPACE TITLE RODRIGUEZ, MIGUEL A 9180 DERTH ROAD STREET ADDRESS CITY - ST - 7IP LAKE WORTH, FL 33467 TITLE NAME STREET ADDRESS CITY - ST - ZIP NAME

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 truetes employee the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapted or on an attachment with an agricult.

SIGNATURE: 2

STREET ADDRESS CITY - ST - ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LICK LEMANE

1-25-08 (9,0)9

Daytime Phone #