2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2009
Secretary of State

DOCUMENT# P05000075453

Entity Name: CITY AUTOMOTIVE-SUZUKI, INC.

Current Principal Place of Business:

10585 ATLANTIC BLVD.
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

10585 ATLANTIC BLVD.
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 20-2883324 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GALEANI, JOHN
10585 ATLANTIC BLVD
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

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:

Title: DC ( ) Delete
Name: BRESNAM, WILLIAM J.
Address: 15 BYRAM SHORE RD.
City-St-Zip: GREENWICH, CT 06830

Title: DP ( ) Delete
Name: GALEANI, JOHN
Address: 1628 BEACH AVE.
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: VCFO ( ) Delete
Name: ROSA, SALVATORE
Address: 10585 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32225

Title: S ( ) Delete
Name: BRESNAN, ROBERT
Address: 10585 ATLANTIC BLVD.
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete
Name: BRESNAN, PATRICK
Address: 341 STANWICH RD.
City-St-Zip: GREENWICH, CT 06897

Title: D ( ) Delete
Name: DEMOND, JEFFREY S.
Address: 281 WESTPORT RD.
City-St-Zip: WILTON, CT 06897

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change ( ) Addition
Name: BRESNAM, WILLIAM J.
Address: ONE MANHATTANVILLE RD
City-St-Zip: PURCHASE, NY 10577

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VT (X) Change ( ) Addition
Name: ROSA, SALVATORE
Address: 10585 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32225

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: DEMOND, JEFFREY S.
Address: ONE MANHATTANVILLE RD
City-St-Zip: PURCHASE, NY 10577

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: SALVATORE ROSA VT 02/18/2009

Electronic Signature of Signing Officer or Director — Date