

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P06873 (4)
1. Corporation Name
CAPITAL AUTOMOTIVE RESOURCES, INC.



Principal Place of Business
800 HART RD
P.O. BOX 8109
BARRINGTON IL 60010
US

Mailing Address
DEPT. 8209
260 LONG RIDGE RD. JAMS
STAMFORD CT 06827-9621
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 07/25/1985
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 99-0191099
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
24 Country	29 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPT	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HYDE, JEFFREY L	1.2 NAME	
STREET ADDRESS	260 LONG RIDGE RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	STAMFORD CT	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DERICKSON, SANDRA	2.2 NAME	
STREET ADDRESS	800 HART RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BARRINGTON IL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEWART, EDWARD D.	3.2 NAME	
STREET ADDRESS	800 HART ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	BARRINGTON IL	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WERNER, JEFFREY S.	4.2 NAME	
STREET ADDRESS	777 LONG RIDGE RD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	STAMFORD CT	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRABER, SARAH J.	5.2 NAME	
STREET ADDRESS	800 HART ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	BARRINGTON IL	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRENNAN, WILLIAM H.	6.2 NAME	
STREET ADDRESS	777 LONG RIDGE ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	STAMFORD CT	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.

SIGNATURE: M. H. B. Brennan, William H. Brennan, Secretary of State

CR2E034 (10/97)

For Year: 1998

4/29/98

000145

Capital Automotive Resources, Inc.

990191099

Name	Title	Business Address
Sandra L. Derickson	Director	540 Northwest Highway Barrington IL 60010
Sandra L. Derickson	Chairman of the Board	540 Northwest Highway Barrington IL 60010
Virginia A. Romans	Director	540 Northwest Highway South Barrington IL 60010
John M. Squarok	Director	55 Federal Road Danbury CT 06810
John Arnato	Assistant Treasurer - State Taxes	777 Long Ridge Road Stamford CT 06927
Joseph T. Cassidy	Vice President - Taxes	777 Long Ridge Road Stamford CT 06927
Laura L. Davis	Assistant Secretary	540 Northwest Highway South Barrington IL 60010
Sandra L. Derickson	President	540 Northwest Highway Barrington IL 60010
Jeanne M. Horton	Secretary	19-21 Rue de la Bienfaisance 75008 Paris France
Jeffrey L. Hyde	Vice President - Taxes	777 Long Ridge Road Stamford CT 06927
Kenneth E. Kempson	Assistant Treasurer - Taxes	777 Long Ridge Rd. Stamford CT 06927
Patricia M. Lecouras	Assistant Treasurer - State Taxes	777 Long Ridge Road Stamford CT 06927
Virginia A. Romans	Vice President	540 Northwest Highway South Barrington IL 60010
Richard A. Rosenthal	Assistant Secretary	540 Northwest Highway South Barrington IL 60010
Howard A. Salk	Assistant Secretary	540 Northwest Highway South Barrington IL 60010
Gary J. Schulman	Assistant Treasurer - State Taxes	777 Long Ridge Rd. Stamford CT 06927
John M. Squarok	Vice President - Finance	55 Federal Road Danbury CT 06810
Judith M. Van Cleave	Assistant Treasurer - State Taxes	4315 Metro Parkway Ft. Myers FL 33916
Jeffrey S. Werner	Treasurer	201 High Ridge Road Stamford CT 06927