


**FILED**  
**Mar 10, 2003 8:00 am**  
**Secretary of State**

02-10-2003 90178 031 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # P08360**  
 1. Entity Name  
**HOLMAN ENTERPRISES, INC.**



Principal Place of Business  
 7411 MAPLE AVE.  
 PENNSAUKEN NJ 08109

Mailing Address  
 7411 MAPLE AVE.  
 PENNSAUKEN NJ 08109

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 City & State

Zip Country Zip Country

4. FEI Number **21-0610247** Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

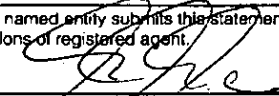


CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent  
**REIF, DANIEL S**  
**911 N.E. SECOND AVE.**  
**FT. LAUDERDALE FL 33304**

7. Name and Address of New Registered Agent  
 Name **GARDNER, GLENN A.**  
 Street Address (P.O. Box Number is Not Acceptable)  
**911 N.E. SECOND AVENUE**  
 City **FT. LAUDERDALE FL** Zip Code **33304**

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  DATE **03/03/03**

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CD</b> <b>HOLMAN, J. S.</b> <b>7411 MAPLE AVENUE</b> <b>PENNSAUKEN NJ</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>REIF, D.S.</b> <b>7411 MAPLE AVENUE</b> <b>PENNSAUKEN NJ</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VCPD</b> <b>HOLMAN, MK</b> <b>7411 MAPLE AVENUE</b> <b>PENNSAUKEN NJ 08109</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>HERRINGTON, H. H.</b> <b>7411 MAPLE AVENUE</b> <b>PENNSAUKEN NJ</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b> <b>MULLIN, K A</b> <b>7411 MAPLE AVENUE</b> <b>PENNSAUKEN NJ 08109</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>ANDREOLA, A. V.</b> <b>7411 MAPLE AVENUE</b> <b>PENNSAUKEN NJ</b> <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>GARDNER, G.A.</b> <b>7411 MAPLE AVENUE</b> <b>PENNSAUKEN, NJ 08109</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: **SIGNATURE REQUIRED K.A. MULLIN - ASSI. SECRETARY (2/5/03 856) 663 5200** Date Daytime Phone #

CR2E034 (10/02)

*Attest*

HOLMAN ENTERPRISES

DIRECTORS & OFFICERS

*580/8067*

*# P08360*

<u>Name</u>	<u>Address</u>	<u>Title</u>	<u>Director</u>
Joseph S. Holman 151-14-2649	7411 Maple Avenue Pennsauken, NJ 08109	Chairman of the Board	X
Jean P. Holman 140-20-2989	"		X
Melinda K. Holman 157-64-6157	"	Vice Chairperson & President	X
William J. Cariss 211-48-7423	"	Vice President of Dealership Operations	
Glenn A. Gardner 193-48-8821	"	Vice President	
Henry H. Herrington 076-38-0543	"	Vice President	
Frank J. Lepore 174-32-1049	"	Vice President	
Robert R. Campbell 200-38-7180	"	Vice President - Finance Treasurer/Assistant Secretary	
Albert V. Andreola 182-26-7923	"	Secretary	
Katherine A. Mullin 140-46-9549	"	Assistant Secretary	X