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Jan 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000004332 (2)

1. Corporation Name
ZIGLAR'S AUTO SALES, INC.



Principal Place of Business: 1820 S FERDON BLVD CRESTVIEW FL 32536
Mailing Address: 1820 S FERDON BLVD CRESTVIEW FL 32536-9444

3. Date Incorporated or Qualified: 11/09/1992
3a. Date of Last Report: 03/11/1996

2. Principal Place of Business: 21 1497 S Ferdon Blvd
2a. Mailing Address: 26 1497 S Ferdon Blvd

4. FEI Number: 59-3154698
Applied For: Not Applicable

22 City & State: Crestview FL
27 City & State: Crestview FL

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

23 Zip: 32536
28 Zip: 32536

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

24 Country: 25 Country: 29 Country: 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes

9. Name and Address of Current Registered Agent

FLEET, H. BART
1201 EGLIN PKWY
SHALIMAR FL 32579

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

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: _____ DATE: _____
(NOTE: Registered Agent's signature required when reinstating.)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	ZIGLAR, JENNIE NELL	
STREET ADDRESS	1820 S FERDON BLVD	
CITY-ST-ZIP	CRESTVIEW FL 32536	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	DAY, JOHN G	
STREET ADDRESS	1585 SPEARL ST	
CITY-ST-ZIP	CRESTVIEW FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Jennie Nell Ziglar Day	
1.3 STREET ADDRESS	1585 Spearl St	
1.4 CITY-ST-ZIP	Crestview, FL 32539	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Helen F Ziglar	
3.3 STREET ADDRESS	5133 Park St	
3.4 CITY-ST-ZIP	Crestview, FL 32539	
4.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Alonia Ziglar	
4.3 STREET ADDRESS	103 N Lincoln St	
4.4 CITY-ST-ZIP	Crestview, FL 32536	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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: Jennie Nell Ziglar Day, Jennie Nell Ziglar Day 1-9-97 (904) 682-7800

CR2E034 (9/96)