FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P93000029208 (4) **DOCUMENT #**

MANATEE PRIDE AUTO SALES, INC.

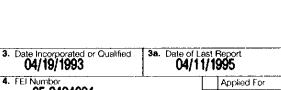
Principal Place of Business
5327 14TH STREET WEST
BRADENTON FL 34207

2. Principal Place of Business

Mailing Address

2a. Mailing Address

5327 14TH STREET WEST **BRADENTON FL 34207**



1		26				00 040402 1		Not Applicable	
Suite, Api	t. #, etc.	Suite, Apt. #, e	tc.			5. Certificate of Status Desired	CJ	\$8.75 Additional Fee Required	
City & Sta	ate	City & State				Election Campaign Financing Trust Fund Contribution	£]	\$5.00 May Be Added to Fees	
Zip	Country 25	Zip	30 Cour	ntry		l :	~	under s 199.032,	
	9. Name and Address of Cur	ent Registered Agent				10. Name and Address of New Registered Agent			
				81	Name				
CARL 5327	, JILL 14TH STREET WEST		Trust Fund Contribution Country 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No 10. Name and Address of New Registered Agent						
BRAD	ENTON FL 34207								
				84	City	FL			
11 Duraupa	t to the provisions of Continue CO7.0	E00 and C07 1500 Florida I	Ctabutan the above	n	amad carparat	ion cubrnite this statement for the ou	roore of obsi	raina ite ragistared 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

SIGNATURE	n, and accept the obligations of, Section 607.0505, Florida S		
	Synature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required v	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TOTLE	PSD DELE	TE. 1. 1 TITLE	Change Addition
NAME	CARL, JILL	1.2 NAME	
STREET ADDRESS	5327 14TH STREET WEST	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34207	1.4 CITY-ST-ZIP	
TITLE	☐ DELE	TE. 2. 1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
- AMERICAN		2 3 STREET ADDRESS	·
CHY-S1-ZIP		2 4 CITY - ST- ZIP	
TITLE	DELE	TE 3.1 TITLE	Change Addition
NAME		3 2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY - ST - ZIP	
TITLE	☐ DELE	TE 4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CiTY - ST - ZIP	
TITLE	☐ DELE	TE: 5 1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STHEET ADDRESS		5 3 STREET ADDRESS	
CITY-ST-ZIP		5 4 CITY-ST-ZIP	
TITLE	☐ DELE	TE: 6 1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY - ST - ZIP		64 CITY-ST-ZIP	

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 shanged, or on an attachment with an address.

JILL N. CARL 4/8/96 941/758-3916