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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P94000037028 (5)

FAIRWAY JEEP-EAGLE, INC.

FILED Apr 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				I ventiant in their eint antis antis antis ende siett somt antis eines tent inn		
2499 N. ORANGE BLOSSOM TRAIL KISSIMMEE FL 34744-2345			2499 N. ORANGE BLOSSOM TRAIL KISSIMMEE FL 34744-2345			#8 8B4 05
US		US	US		DO NOT WRITE IN THIS SPACE	
		<u>.</u>			3. Date Incorporated or Qualified 05/16/1994	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26			59-3366978	Not Applicable
Suite, Apt. #, etc.		·	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State	City & State			Fee Required
23		<u>├</u>	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country			Zip Country		This corporation owes or has paid the	
24	25	29	30	•	Personal Property Tax due June 30.	Yes No
==1	9. Name and Address of Curre		1441		10. Name and Address of New Register	ed Agent
MCCLELLAND, ROBERT E				81 Name		
	O S. ORANGE BLOSSOM TRAI	L		82 Street Add	fress (P.O. Box Number is Not Acceptable)	
	ANDO FL 32809			oz Sireer Add	iress (F.O. Box Number is Not Acceptable)	
• • • • • • • • • • • • • • • • • • • •	- 4,50			83		
				84 City		85 Zip Code
				84 City		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 harve of repistered agent and title diapplicable (NOTE Registored Agent signature required when reinstating) DATE						
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	DELETE	1.170	LE		Change Addition
NAME	MCCLELLAND, ROBERT E		1.2 NA	ME		
STREET ADDRESS	7530 S. ORANGE BLOSSON	A TRAIL	1.3 ST	REET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		1.4 CI	TY-ST-ZIP		
TITLE	VST	☐ DELETE	2.1 717	ILE		Change Addition
NAME	MCCLELLAND, ROBERT B		2.2 NA	ME		
STREET ADDRESS	2499 N. ORANGE BLOSSON	M TRAIL	2.3 ST	REET ADORESS		
CITY-ST-ZIP	KISSIMMEE FL		2.40	TY-ST-ZIP		
TITLE		☐ DELETE	3.1 717	ILE		Change Addition
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 ST	reet address		
CITY-ST-ZIP		П		TY-ST-ZIP		Observe Address
TITLE		☐ DELETE	4.1 111	i		Change Addition
NAME			4. 2 N			
STREET ADDRESS			,,,,,,	REET ADORESS		
CITY-ST-ZIP		T or ere		TY-ST-ZIP		Change Addition
TITLE		☐ DELETE	5.1 TIT	i		☐ Change ☐ Addition
NAME			5.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CI 6.1 TII	TY-ST-ZIP		Change Addition
TITLE			6.1 III 6.2 NA	\		C Ondrigo C Modificia
NAME STREET ADDRESS	\sim			· \		
STREET ADDRESS				REET ADDRESS		
14. I hereby c	ertify that the information supplied	with this fill a does not quali	fy for the exe	IY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I furthe	or certify that the information
indicated	on this annual it port or supplemen	ital annual report is true and	accurate and	that my signati	ure shall have the same legal effect as if made	e under oath; that I am an

s to execute this report as equired by Chapter 607, Florida Statutes; and that my name appears in