


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

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000058201 (2) 1. Corporation Name TAYLOR & SON AUTOMOTIVE, INC.					
Principal Place of Business 2414 10TH STREET COURT EAST ELLENTON FL 34222			Mailing Address 2414 10TH STREET COURT EAST ELLENTON FL 34222-4007		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 08/05/1994 3a. Date of Last Report 04/25/1996 4. FEI Number 65-0509052 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent MCGUIRE, PRATT, MASIO & FARRANCE, P.A. 1001 3RD AVENUE WEST SUITE 600 BRADENTON FL 34205				10. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS 1.1 TITLE D 1.2 NAME TAYLOR, GEORGE JR. 1.3 STREET ADDRESS 3923 SIXTH AVENUE WEST 1.4 CITY-ST-ZIP PALMETTO FL 34221 1.5 TITLE D 1.6 NAME TAYLOR, GEORGE III 1.7 STREET ADDRESS 3923 SIXTH AVENUE WEST 1.8 CITY-ST-ZIP PALMETTO FL 34221 1.9 TITLE D 1.10 NAME TAYLOR, MARY 1.11 STREET ADDRESS 3923 SIXTH AVENUE WEST 1.12 CITY-ST-ZIP PALMETTO FL 34221 1.13 TITLE DELETED 1.14 NAME DELETED 1.15 STREET ADDRESS DELETED 1.16 CITY-ST-ZIP DELETED 1.17 TITLE DELETED 1.18 NAME DELETED 1.19 STREET ADDRESS DELETED 1.20 CITY-ST-ZIP DELETED 1.21 TITLE DELETED 1.22 NAME DELETED 1.23 STREET ADDRESS DELETED 1.24 CITY-ST-ZIP DELETED					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.3 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.5 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.6 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.7 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.8 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.9 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.10 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.11 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.12 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.13 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.14 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.15 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.16 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition					
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: MARY R. TAYLOR 4-27-97 941-722-0607 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					



CR2E034 (9/96)