FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

MAY -1 PM 2:28

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P94000065789 (7)

1. Corporate Name

PRIME AUTO SALES OF PALM BAY, INC.

Principal Place of Business	Mailing Address
1580 PALM BAY ROAD NE PALM BAY FL 32905	1580 PALM BAY ROAD NE PALM BAY FL 32905

3. Date Incorporated/Qualified: 09/02/1994 3a. Date of Last Report: first

4. FEI Number: 59-3262441 ☐ Applied For ☐ Not Applicable

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

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

7. Is this corporation filing for the first time with the Florida Department of State? ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
DRUCKENMILLER, THOMAS 530 SAWGRASS CIRCLE MELBOURNE FL 32940	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 Section 607.0505, Florida Statutes, the above named corporation submits the 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 duties of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition President Thomas E. Druckenmiller 530 Sawgrass Circle Melbourne, FL 32940
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition Secretary/Treasurer Laurie A. Druckenmiller 530 Sawgrass Circle Melbourne, FL 32940
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is accurate, and that such additional information as may be required by the applicable provisions of Section 607.0505, Florida Statutes, and that all requirements of Chapter 607, Florida Statutes, relating to the preparation of this report, have been complied with. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, Florida Statutes.

SIGNATURE: Thomas E. Druckenmiller 4/28/95 407 722-1999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas E. Druckenmiller, President

000J7109 CP