

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

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AND  
FILED

99 FEB 12 PM 1:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

0013962

|  |   |  |
|--|---|--|
| PROFIT<br>CORPORATION<br>ANNUAL REPORT<br>1999 |  | FLORIDA DEPARTMENT OF STATE<br><b>Katherine Harris</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|--|---|--|

DOCUMENT # P94000084519

1. Corporation Name

WALLACE LINCOLN-MERCURY, INC.

Principal Place of Business

3626 NORTHLAKE BLVD.  
LAKE PARK FL 34403  
US

Mailing Address

110 S.E. SIXTH ST  
STE. 1200  
FT. LAUDERDALE FL 33301  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/18/1994

4. FEI Number

65-0522036

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE

P  
NAME WALLACE, WILLIAM L  
STREET ADDRESS 195 & LINTON BLVD.  
CITY-ST-ZIP DELRAY BEACH FL

1.2 NAME

V  
NAME SMITH, LEE  
STREET ADDRESS 195 & LINTON BLVD.  
CITY-ST-ZIP DELRAY BEACH FL

1.3 STREET ADDRESS

DS  
NAME COLE, JAMES O  
STREET ADDRESS 110 S.E. SIXTH ST  
CITY-ST-ZIP FT. LAUDERDALE FL 33301

1.4 CITY-ST-ZIP

D  
NAME HAWKINS, THOMAS W.  
STREET ADDRESS 110 S.E. SIXTH ST  
CITY-ST-ZIP FT. LAUDERDALE FL 33301

1.5 CITY-ST-ZIP

1.6 CITY-ST-ZIP

1.7 CITY-ST-ZIP

1.8 CITY-ST-ZIP

1.9 CITY-ST-ZIP

1.10 CITY-ST-ZIP

1.11 CITY-ST-ZIP

1.12 CITY-ST-ZIP

1.13 CITY-ST-ZIP

1.14 CITY-ST-ZIP

1.15 CITY-ST-ZIP

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

See attachment

1000002776871-111  
-02/16/99--01046--004

\*\*\*\*150.00 \*\*\*\*150.00

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I 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, with an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/99 (954) 719-6000

CR2E034 (11/98)

**Wallace Lincoln-Mercury, Inc.**

| <u>OFFICE</u>           |       | <u>NAME</u>        |
|-------------------------|-------|--------------------|
| Directors               | ..... | Thomas W. Hawkins  |
|                         | ..... | James O. Cole      |
| President               | ..... | William L. Wallace |
| Chief Financial Officer | ..... | Lee Smith          |
| Vice Presidents         | ..... | Lee Smith          |
|                         | ..... | James O. Cole      |
| Secretary               | ..... | James O. Cole      |
| Treasurer               | ..... | Kathleen Hyle      |

Address for all officers and directors is:    110 SE 6<sup>th</sup> Street, 20<sup>th</sup> Floor  
Fort Lauderdale, Florida 33301