

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

P94 0000 89931

CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mormann

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

EXPRESS Auto Group USA, Inc.

600001840376
-05/28/96--01024--027
***1125.00

Principal Place of Business

Mailing Address

3500 Phillips Highway
JACKSONVILLE, FL. 32207 DUVAL

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		Dec. 1994		Jul 1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		59-3281108		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution		☐ \$5.00 May Be Added to Fees	
Zip		Country		Zip		Country	
24		25		29		30	
24		25		29		30	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PADRAIC Eoin Mulvihill, Suite 1A2
Corporate Secretary
3500 Phillips Highway
JACKSONVILLE, FL. 32207

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84

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 of Registered Agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

MAY 4, 1996

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT / DIRECTOR	1.1 TITLE	☐ Change ☐ Addition
NAME	JAMES R. JOHNSON	1.2 NAME	
STREET ADDRESS	3500 Phillips Highway JACKSONVILLE, FL. 32207	1.3 STREET ADDRESS	
CITY-ST-ZIP		2.1 TITLE	☐ Change ☐ Addition
TITLE	Secretary / Director	2.2 NAME	
NAME	PADRAIC Eoin Mulvihill	2.3 STREET ADDRESS	
STREET ADDRESS	3500 Phillips Highway JACKSONVILLE, FL. 32207	2.4 CITY-ST-ZIP	
CITY-ST-ZIP		3.1 TITLE	☐ Change ☐ Addition
TITLE	Treasurer	3.2 NAME	
NAME	PATRICIA D. Smith	3.3 STREET ADDRESS	
STREET ADDRESS	3500 Phillips Highway JACKSONVILLE, FL. 32207	4.1 TITLE	☐ Change ☒ Addition
CITY-ST-ZIP		4.2 NAME	
TITLE	Director	4.3 STREET ADDRESS	
NAME	Timothy B. Camwell	4.4 CITY-ST-ZIP	
STREET ADDRESS	3500 Phillips Highway JACKSONVILLE, FL. 32207	5.1 TITLE	☐ Change ☒ Addition
CITY-ST-ZIP		5.2 NAME	
TITLE	DIRECTOR	5.3 STREET ADDRESS	
NAME	NORMAN L. MADAN	5.4 CITY-ST-ZIP	
STREET ADDRESS	3500 Phillips Highway JACKSONVILLE, FL. 32207	6.1 TITLE	☐ Change ☒ Addition
CITY-ST-ZIP		6.2 NAME	
TITLE	Director	6.3 STREET ADDRESS	
NAME	G. LARRY Sims	6.4 CITY-ST-ZIP	
STREET ADDRESS	3500 Phillips Highway JACKSONVILLE, FL. 32207		
CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.073(4), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary May 4, 1996