

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000043008 (8)

1. Corporation Name

DEALER PROFIT SYSTEMS, INC.



Principal Place of Business

Mailing Address

~~601 BAYSHORE BLVD.~~
~~SUITE 700~~
TAMPA FL 33606

~~601 BAYSHORE BLVD.~~
~~SUITE 700~~
TAMPA FL 33606

2. Principal Place of Business

2a. Mailing Address

21 10031 Dale Mabry Highway

26 10031 Dale Mabry Highway

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

Tampa, FL

28 City & State

Tampa, FL

24 Zip

33618

25 Country

29 Zip

33618

30 Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/02/1995

3a. Date of Last Report

4. FEI Number

X 593317258

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

BARNETT, LESLIE J
601 BAYSHORE BLVD.
SUITE 700
TAMPA FL 33606

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P/S/T/D ☐ DELETE

NAME Cole, James W.
STREET ADDRESS 10031 Dale Mabry Highway
CITY-ST-ZIP Tampa, FL 33618

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James W. Cole, President

X 2-29-96

Date

X 813 265 4330

Daytime Phone #

CR2E034 (12/95)