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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P95000048628 (8)

PRESTIGE AUTO SALES OF FT WALTON BEACH, INC.

Principal Place of Business

Mailing Address

FILED May 11 1998 8:00am Secretary of State



816 SPANISH MOSS TRAIL 816 SPANISH MOSS TRAIL **DESTIN FL 32541** DESTIN FL 32541 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/19/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For Box 1675 17 HOWWOOD BUD J. D. 59-3320672 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be WALTON BCH 23 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible 30 OKALOOSA 25 OKALUOSA Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SHORT, JR., JAMES E 1675 FORT WALTON BEACH 82 **FORT WALTON FL 32549** 83 84 11. Pursuant tonhe 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 armital with, and accept the originations of Section 607.0505, Florida Statutes. RECTOR SIGNATURE spiritized agent and title if applicable gistored Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TOTAL ARIA B WILSON CHORT, JAMES E NAME 716 ST ROSE COVE - 818 SPANISH MOSS TRAIL-STREET ADDRESS 1.3 STREET ADDRESS DESTIN FL 32641. 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE wilcon, larry J. 2.2 NAME NAME 716-ST: ROSE-COVE-STREET ADDRESS 2.3 STREET ADDRESS MICEVILLE FL -CITY-ST-ZIP 2. 4 CITY-ST-2IP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change ■ Addition NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change 5.1 TITLE Addition TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition 6.1 TITLE ☐ Change TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. Thereby 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 signalure shall have the same legal effect as if made under oath; that I am an officer or director of the deriver or trusted 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.

CICNIATURE.

4/30/98

3 850-664-29994