FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000078235 (5)**

1. Corporation Name

TOP LINE AUTO BROKERS, INC.

Principal Place of Business	Mailing Address
5385 YAHL ST. NAPLES FL 33942	5385 YAHL ST. NAPLES FL 33942

2. Principal Place of Business
21 3384 Mercantile Ave.
22 Suite, Apt. #, etc.
23 City & State: Naples, Fl. 33942
24 Zip
25 Country

2a. Mailing Address
26 3384 Mercantile Ave.
27 Suite, Apt. #, etc.
28 City & State: Naples, Fl. 33942
29 Zip
30 Country

3. Date Incorporated or Qualified: 10/09/1995

3a. Date of Last Report

4. FEI Number: 65-0613728 ☐ 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

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

9. Name and Address of Current Registered Agent

FOWELL, DONALD L
5385 YAHL ST.
NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name: Donald L. Fowell
82 Street Address (P.O. Box Number is Not Acceptable): 3384 Mercantile Ave.
83
84 City: Naples, FL 85 Zip Code: 33942

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 New Registered Agent, if changing) (Name of New Registered Agent, if changing) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	FOWELL, DONALD L		1.2 NAME		
STREET ADDRESS	5385 YAHL ST.		1.3 STREET ADDRESS	3384 Mercantile Ave.	
CITY-ST-ZIP	NAPLES FL 33942		1.4 CITY-ST-ZIP	Naples, Fl. 33942	
TITLE	DV	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	FOWELL, KAREN A		2.2 NAME		
STREET ADDRESS	5385 YAHL ST.		2.3 STREET ADDRESS	3384 Mercantile Ave.	
CITY-ST-ZIP	NAPLES FL 33942		2.4 CITY-ST-ZIP	Naples,Fl. 33942	
TITLE	TS	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	WHEELER, RICHARD S		3.2 NAME		
STREET ADDRESS	2585 LONGBOAT DR.		3.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 33942		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 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 119.07(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.

SIGNATURE: Donald Fowell Feb 19 '96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)