

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000058575

Entity Name: AUTOMAX OCALA, INC.

FILED
Mar 29, 2010
Secretary of State

Current Principal Place of Business:

1918 SW 17TH STREET
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

P O BOX 3808
OCALA, FL 34478

New Mailing Address:

FEI Number: 59-3432726

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLTON, LINDA L
1918 SW 17TH STREET
OCALA, FL 34474 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES
Name: PEARSON, FRANK A
Address: 842 DOVER BLUFF PLACE
City-St-Zip: MANAKIN-SABOT, VA 23103

Title: VP
Name: HOLIAN, BERNARD B
Address: 3576 SW SHOREWOOD DR
City-St-Zip: DUNNELLON, FL 34431

Title: VP
Name: HALE, BRUCE W
Address: 15418 HOUDDMASTER TERR
City-St-Zip: MIDLOTHIAN, VA 23112

Title: S
Name: WOOTEN, DONNA L
Address: 603 SCOTTER HILLS PLACE
City-St-Zip: MIDLOTHIAN, VA 23114

Title: CD
Name: PEARSON, MAX H
Address: 5080 N OCEAN DR #14A
City-St-Zip: SINGER ISLAND, FL 33404

Title: VP
Name: PEARSON, PATRICIA M
Address: 13510 STONEGATE RD
City-St-Zip: MIDLOTHIAN, VA 23113

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DONNA L WOOTEN

S

03/29/2010

Electronic Signature of Signing Officer or Director

Date