

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

FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000075308 (2)

1. Corporation Name
CHIEF'S AUTO SALES, INC.



Principal Place of Business
19 WEST 33RD STREET
JACKSONVILLE FL 32206

Mailing Address
19 WEST 33RD STREET
JACKSONVILLE FL 32206-6426

3. Date Incorporated or Qualified
09/09/1996

3a. Date of Last Report

2. Principal Place of Business
21 7 EAST 27TH ST.
Suite, Apt. #, etc.

2a. Mailing Address
26 7 EAST 27TH ST
Suite, Apt. #, etc.

4. FEI Number
59-3396082

Applied For
Not Applicable

22 City & State
23 JACKSONVILLE, FL
24 Zip 32206
25 Country DUVAL

27 City & State
28 JACKSONVILLE FL
29 Zip 32206
30 Country DUVAL

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

MCGOWAN, EDWARD G
271 EAST 48TH STREET
JACKSONVILLE FL 32208

10. Name and Address of New Registered Agent

81 Name

N/A

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 type of corporation name of registered agent, and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P/T
NAME Rosalind A. HANDERS
STREET ADDRESS 271 E. 48TH ST
CITY, ST, ZIP JACKSONVILLE, FL 32208
DELETE ☒

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DELETE ☐

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DELETE ☐

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DELETE ☐

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DELETE ☐

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DELETE ☐

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DELETE ☐

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DELETE ☐

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DELETE ☐

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DELETE ☐

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DELETE ☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/T/S
1.2 NAME Edward G. MCGOWAN
1.3 STREET ADDRESS 271 E. 48TH ST
1.4 CITY-ST-ZIP JACKSONVILLE, FL 32208
Change ☒ Addition ☒

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
Change ☐ Addition ☐

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
Change ☐ Addition ☐

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
Change ☐ Addition ☐

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
Change ☐ Addition ☐

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
Change ☐ Addition ☐

7.1 TITLE
7.2 NAME
7.3 STREET ADDRESS
7.4 CITY-ST-ZIP
Change ☐ Addition ☐

8.1 TITLE
8.2 NAME
8.3 STREET ADDRESS
8.4 CITY-ST-ZIP
Change ☐ Addition ☐

9.1 TITLE
9.2 NAME
9.3 STREET ADDRESS
9.4 CITY-ST-ZIP
Change ☐ Addition ☐

10.1 TITLE
10.2 NAME
10.3 STREET ADDRESS
10.4 CITY-ST-ZIP
Change ☐ Addition ☐

11.1 TITLE
11.2 NAME
11.3 STREET ADDRESS
11.4 CITY-ST-ZIP
Change ☐ Addition ☐

14. I do hereby 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 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 in an attachment with an address.

SIGNATURE: Edward G. McGowan, VICE PRESIDENT

3/25/97 (904) 356-1854

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)