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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000075308 (2)

CHIEF'S AUTO SALES, INC.

Principal Place of Business

Mailing Address

FILED May 01 1998 8:00am Secretary of State



7 EAST 27TH ST 7 EAST 27TH ST JACKSONVILLE FL 32206 JACKSONVILLE FL 32206 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/09/1996 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3396082 Not Applicable 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 25 29 30 ☐ Yes Personal Property Tax due June 30. g. Name and Address of Current Registered Agent Name and Address of New Registered Agent MCGOWAN, EDWARD G 271 EAST 48TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32208 В3 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 liftle if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS S TO OFFICERS AND DIRECTORS IN 12 12. 13. Change TITLE DELETE 11 THUE Landers, Rosalin MCGOWAN, EDWARD G NAME 1.2 NAME 7410 westwind 271 E 48TH ST STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 32208 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 31 THLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE [] Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7/P DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY- \$1-ZIP DELETE TITLE Change Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - \$1 - 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of 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, if on an attropyrent with an address.

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