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PROFIT CORPORATION ANNUAL REPORT

1997

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appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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FLORIDA DEPARTMENT OF STATE

FILED

Apr 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000094658 (7)

AUTO LAND OF VOLUSIA COUNTY, INC.

Principal Place of Business Mailing Address 1642 EAST NEW YORK AVENUE 1642 EAST NEW YORK AVENUE DELAND FL 32724 **DELAND FL 32724-6244** 3. Date incorporated or Qualified 3a. Date of Last Report 11/15/1996 2. Principal Place of Business 2a. Mailing Address Applied For 9-3418542 SAME SAME 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation has liability for intangible tax under s. 199,032, 25 24 29 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 KENNEDY, BILLY N 1642 EAST NEW YORK AVENUE Street Address (P.O. Box Number is Not Acceptable) **DELAND FL 32724** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Soctions 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 fagiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. ORETTA 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) DELETE THE 1.1 TITLE NAM: KENNEDY, BILLY 1.2 NAME STREET ADDRESS 2080 GLENWOOD HAMMOCK ROAD 1.3 STREET ADDRESS DELAND FL 32720 CITY-ST-ZIP 1.4 CITY - ST - ZIP THILE DELETE 21 TITLE Change ☐ Addition NAME HAIR. STEVEN M 22 NAME STREET ADDRESS 2640 PHEASANT VILLAGE 23 STREET ADDRESS DELAND FL 32720 CITY - ST - ZIP 2 4 CiTY-ST-ZIP DELETE THLE 31 TITLE Addition NAM: HAIR, LORETTA H 3.2 NAME STREET ADDRESS 2640 PHEASANT VILLAGE 33 STREET ADDRESS CITY - ST - ZIP DELAND FL 32720 3 4. CITY - ST - ZIP DELETE THE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - \$1 - 7(P 4.4 City - St - ZiP DELETE 51 TITLE Change Addition NAM: S 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CRTY - ST - ZIE 5.4 CITY - ST - ZIP Mille DELETE 6.1 TITLE Change Addition NAME 6.2 NAME

SIGNATURE: Joute to Type on Printed NAME OF SIGNATURE AND TYPE OF OF SIGNATURE AND

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the

6.3 STREET ADDRESS

6.4 CHTY - ST - ZIP

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