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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS



98 JUL -7 AM 11: 16

	1 <b>9</b> 98	188	2 11 101	DIVISION OF	CORPORA	TIONS		98 JUL -7 APHI	10		
DOI 1. corp	DOCUMENT # P96000101058 1. Corporation Name							SECRETARY OF STATE TALLAHASSEE, FLORIDA			
	AUTOMOTIVE MANAGEMENT, INC.										
Principal Place of Business Mailing Address								1			
4222 NW 13TH STREET 4222 NW 13TH 9					STREET	r					
GAINESVILLE, FL 32609 GAINESVILLE,					FL 326	509		DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified				
								12/16/1996			
2. Princ	cipal Place of Bus	sinoss	<del>}</del>	2a. Mailing Address				4. FEI Number 59-3414767	Applied		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				<del></del>	8.75 Additi	plicable	
22			27					5. Certificate of Status Desired	Fee Require		
City	& State		} <del>-</del> -	City & State					\$5.00 May		
Zip		Country	28 Z <sub>0</sub>		Cour	htry		Trust Fund Contribution	Added to Fe		
24		25	29	,	30	шу		8. This corporation owes or has paid the current Personal Property Tax due June 30.			
	9. Nam	e and Address of Cu		d Agent	100			10. Name and Address of New Registered Age			
FROCKT, JERRY B						B1 Name	FR	ROCKT, JERRY B.			
198 SUMMERFIELD DRIVE						82 Street Address (P.O. Box Number is Not Acceptable)					
PONTE VEDRA BEACH, FL 32082						4222 NW 13TH STREET					
B4 City GAI							NESVILLE FL 8	32609	3		
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 re- 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 reg										nistered	
age	ent. I am <b>(m</b> iliar v	with, and accept the c	ort's board of directors, i hereby accept the appoint	meni as regis	stered						
SIGNAT		ed or printed name of register	Shoe	<b>7</b> 13	F : Posistered	Apost propoler	ro toouire	d when reinstating) DATE	<u> </u>		
12.	atpunon, type		AND DIRECTO		13.	Agent signator	ie requiec	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN	12	
TITLE	PRESI			DELETE	1.1 TITE	.F	PD	<u> </u>	Change	Addition	
NAME	1 .	JERRY B. FROCKT						RRY B. FROCKT			
STREET AD		UMMERFIELD I					42	22 NW 13TH STREET INESVILLE, FL 32609			
CITY-ST-	ZIP PUNTE	VEDRA BEAC	H, FL 320	DELETE	2.1 TITE	Y-ST-ZIP F			Change K	Addition	
NAME	1	- I				f		M L. WILLIAMS			
STREET AD	DRESS				2.3 STA	EET ADDRESS		22 NW 13TH STREET			
CITY-ST-	ZIP							INESVILLE, FL 32609	·		
TITLE	]			L. DELETE	3.1 TiTI			Ц	Change	Addition	
NAME STRIET AD	onece				3.2 NAM						
CITY-ST-						EET ADDRESS Y-ST-ZIP					
TITUE	<u></u>		<del></del>	DELETE	4.1 1111		<del> </del>		Change	Addition	
NAME					4. 2 NA	ME		A*****			
STREET AD	idress				4.3 STR	EET ADDRESS		80000025585:	<u> 508-</u>	∋	
CITY-ST-	ZIP			Deter		Y-ST-ZIP	<u> </u>	800002585; -07/10/980;	[0770	013	
TITLE				DELETE	5.1 TITE			************************************	各国を来るで	Pytook (2)	
NAME Street ad	INAESS				5.2 NAM 5.3 STR	ae Eet address		W MA	•		
CITY+ST-						KET ADDRESS Y-ST-ZIP		X 100			
TITLE	····			DELETE	6.1 TITI	-	1		Change	Addition	
NAME					6.2 NAM	<b>M</b> E					
STREET AD	DRESS				6.3 STR	EET ADDRESS	1				

CITY - ST - ZIP 6.4 CITY - ST - ZIP 14. I 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 eath; that I am an officer or director of the corporation or the receiver or trustee engowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on an attachment with an engress.

71.100