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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000057280

BILL HEARD CHEVROLET CORPORATION-ORLANDO

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90077 017 ***150.00



Principal Place of Business Mailing Address								touttebe tin initi inkli nalit natt outst aufer aufer ande soute trant that and the			
200 BROOKSTONE PARKWAY			200 BROOKSTONE PARKWAY								
SUITE 205		SUITE 205									
COLUMUBUS GA 31904			COLUMUBUS GA 31904				DO NOT WRITE IN THIS SPACE				
								Date Incorporated or Qualifed 06/30/1997			
2. Principal Pl	ace of Business	2a.	Mailing Address				4.	. FEI Number Applied For			
21		26				-	*1	62-1696926 Not Applicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5.	Certificate of Status Desired \$8.75 Additional			
22		27						Fee Required			
City & State			City & State				6.	. Election Campaign Financing \$5.00 May Be			
								Trust Fund Contribution Added to Fees			
Zip Country			Zip Country				8.	. This corporation owes the current year Intangible Personal Property Tax Property Tax			
24	25	29	30	<u> </u>				r disoliar riopolity run.			
	9. Name and Address of Curren	Regis	tered Agent	81	π.		10.	. Name and Address of New Registered Agent			
СТ	CODDODATION SYSTEM			81	' '	Name					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				82	2 :	Street Addres	s (P	P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324											
r CAI	TATION FE 33324			83	1						
				84	4 4	City		85 Zip Code			
					L			FL V			
11. Pursuant	to the provisions of Sections 607.050:	2 and 6	i07.1508, Florida Statutes,	the aboviorized by	/e-r / th	named corpor le corporation	ation 's bo	on submits this statement for the purpose of changing its registered locard of directors. I hereby accept the appointment as registered			
agent. I a	m familiar with, and accept the obligat	tions of	, Section 607.0505, Florid	a Statutes	S.	,		, , .,			
SIGNATURE			_								
	Signature, typed or printed name of registered agen				ent si	ignature required w		reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.	OFFICERS AN	D DIRE		13.		- 1		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D LIEADO MILLIAM E		☐ DELETE	1.1 TITLE							
NAME	HEARD, WILLIAM T	_		1.2 NAME							
STREET ADDRESS	200 BROOKSTONE PKWY #20	0		1.3 STREE							
CITY-ST-ZIP	COLUMBUS GA 31904			1.4 CITY-S		ZiP		☐ Change ☐ Additio			
TITLE	FELDNER, RONALD A			2.1 TITLE 2.2 NAME							
NAME			1								
STREET ADDRESS	200 BROOKSTONE PKWY #20	5		2.3 STREE	ET AI	DDRESS		*** ** * * * * * * * * * * * * * * * *			
CITY-ST-ZIP	COLUMBUS GA 31904			2. 4 CITY-		ZIP		☐ Change ☐ Additio			
TITLE	D		☐ DELETE	3.1 TITLE		İ		Change — Addition			
NAME	YOUNG, RICHARD M	_		3.2 NAME		-					
STREET ADDRESS	200 BROOKSTONE PKWY #20	5		3.3 STREE	ET AI	DDRESS					
CITY-ST-ZIP	COLUMBUS GA 31904			3.4. CITY-		ZIP		☐ Change ☐ Addition			
TITLE			☐ DELETE	4.1 TITLE				☐ Change ☐ Addition			
NAME				4. 2 NAME							
STREET ADDRESS				4.3 STREE	ET A	DDRESS					
CITY-ST-ZIP		_		4.4 CITY-		ZIP		☐ Change ☐ Addition			
TITLE			☐ DELETE	5.1 TITLE				☐ Change ☐ Addition			
NAME				5.2 NAME							
STREET ADDRESS				53 STREE							
CITY-ST-ZIP				5.4 CITY-1		ZIP		PAL. PARE			
TITLE			☐ DELETE	6.1 TITLE				☐ Change ☐ Addition			
NAME				6.2 NAME							
STREET ADDRESS				6.3 STREE	ETA	DORESS					
1				= 0.4 0004		l					

Ion supplied with this filing toes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information or supplemental annual popular is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an an ition or the receiver or truefee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in or on an attach page with an address, with all other like impowered. I hereby certify that the informating indicated on this annual report. officer or director of the corpo Block 12 or Block 13 if change

SIGNATURE: 5

RONALD A. FELDNER ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR