PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT 04-05

DOCUMENT # P98000025890

1. Corporation Name
Sonic Automotive Collision Center of Clearwater, Inc.

2. Principal Office Address	3. Mailing Office Address
6415 Idlewild Road	6415 Idlewild Road
Suite, Apt. #, etc. Suite 109	Suite, Apt. #, etc. Suite 109
City & State Charlotte, NC	City & State Charlotte, NC
Zip 28212 Country USA	Zip 28212 Country USA

4. Date Incorporated or Qualified To Do Business in Florida: March 19, 1998

5. FEI Number: 59-3501024 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $5.00 [redacted]

7. Name and Address of Current Registered Agent

Name: CT Corporation
Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Rd.
Suite, Apt. #, Etc.:
City: Plantation | State: FL | Zip Code: 33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Connie Bryan CONNIE BRYAN ASSOC. ASSISTANT SECRETARY Date:
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	B. Scott Smith	5401 E. Independence Blvd.	Charlotte, NC 28212
V	Mark Iuppenlatz	6415 Idlewild Road	Charlotte, NC 28212
V/T/D	E. Lee Wyatt, Jr.	6415 Idlewild Road	Charlotte, NC 28212
S	Stephen K. Coss	6415 Idlewild Road	Charlotte, NC 28212
Asst S	David Plummer	6415 Idlewild Road	Charlotte, NC 28212
	See attached supplemental sheet		

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: April 26, 2005 704 566-2400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Stephen K. Coss, Secretary

FLR10 - 10/03/04 C T System Online

03

Sonic Automotive Collision Center of Clearwater, Inc.

Florida Secretary of State

CORPORATION REINSTATEMENT Form FL010-08/03/04

9. Supplemental List of Officers/Directors

D	O. Bruton Smith	5401 E. Independence Blvd., Charlotte, NC 28212
AsstS/AsstT	Joseph O'Connor	6415 Idlewild Rd., Ste. 109, Charlotte, NC 28212
AsstS	Mike Mullins	21799 US Hwy. 19 N., Clearwater, FL 33765
AsstS	Lou Lipari	24825 US Hwy. 19 N., Clearwater, FL 33763

Florida Department of State

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CORPORATION REINSTATEMENT

SONIC AUTOMOTIVE COLLISION CENTER OF CLEARWATER, INC

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