

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000084876

FILED
Mar 21, 2007
Secretary of State

Entity Name: SONIC AUTOMOTIVE - 6008 N. DALE MABRY, FL, INC.

Current Principal Place of Business:

6008 N DALE MABRY AVE
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

6008 N DALE MABRY AVE
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-3535965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMITH, B. SCOTT
Address: 5401 E INDEPENDENCE BLVD
City-St-Zip: CHARLOTTE, NC 28218

Title: VPT () Delete
Name: COSPER, DAVID P
Address: 6415 IDLEWILD ROAD SUITE 109
City-St-Zip: CHARLOTTE, NC 28212

Title: AS () Delete
Name: MULLINS, MICHAEL E
Address: 21699 US HIGHWAY 14 N.
City-St-Zip: CLEARWATER, FL 33765

Title: S () Delete
Name: COSS, STEPHEN K
Address: 6415 IDLEWILD ROAD SUITE 109
City-St-Zip: CHARLOTTE, NC 28212

Title: D () Delete
Name: SMITH, O B
Address: 5401 E INDEPENDENCE BLVD
City-St-Zip: CHARLOTTE, NC 28218

Title: AS () Delete
Name: DOBLER, SCOTT
Address: 24825 US HWY 19 NORTH
City-St-Zip: CLEARWATER, FL 33763

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SMITH, B. SCOTT
Address: 6415 IDLEWILD RD SUITE 109
City-St-Zip: CHARLOTTE, NC 28212

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AS (X) Change () Addition
Name: PLUMMER, DAVID
Address: 6415 IDLEWILD ROAD SUITE 109
City-St-Zip: CHARLOTTE, NC 28212

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHELLEY SIGAFOES

CONT

03/21/2007

Electronic Signature of Signing Officer or Director

Date