## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000004218

Entity Name: SAI FL HC6, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
BONDESEN CHEVROLET 2800 S 17-92 DELAND, FL 32720 US				5401 E. INDEPENDENCE BLVD CHARLOTTE, NC 28212 US				
Current Mailing Address:				New Mailing Address:				
BONDESEN CHEVROLET PO BOX 609 DELAND, FL 32720 US				5401 E. INDEPENDENCE BLVD CHARLOTTE, NC 28212 US				
FEI Number:	59-3552436	FEI Number Applied For ( )	FEI Num	nber Not Appli	icable ( ) Certificate of Status Desired ( )			
Name and	Address of	Current Registered Agent:		Name and	Address of New Registered Agent:			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US  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.								
SIGNATUR								
		nic Signature of Registered Agent			Date			
Election Cam	paign Financi	ng Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P ( SMITH, B S 1820 DILWOR CHARLOTTE,			Title: Name: Address: City-St-Zip:	PD (X) Change ( ) Addition SMITH, B. SCOTT 5401 E. INDEPENDENCE BLVD CHARLOTTE, NC 28212			
Title: Name: Address: City-St-Zip:	T ( SCOTT, DOBI 24825 US HW CLEARWATE	Y 19 N		Title: Name: Address: City-St-Zip:	VTD (X) Change ( ) Addition COSPER, DAVID P 5401 E. INDEPENDENCE BLVD CHARLOTTE, NC 28212			
Title: Name: Address: City-St-Zip:	S ( COSS, STEPH 6415 IDLEWI CHARLOTTE,	LD ROAD		Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition COSS, STEPHEN K 5401 E. INDEPENDENCE BLVD CHARLOTTE, NC 28212			
Title: Name: Address: City-St-Zip:	(	) Delete		Title: Name: Address: City-St-Zip:	D () Change (X) Addition SMITH, O. BRUTON 5401 E. INDEPENDENCE BLVD CHARLOTTE, NC 28212			
Title: Name: Address: City-St-Zip:	(	) Delete		Title: Name: Address: City-St-Zip:	ASAT () Change (X) Addition O'CONNOR, JOSEPH D JR 5401 E. INDEPENDENCE BLVD CHARLOTTE, NC 28212			
Title: Name: Address: City-St-Zip:	(	) Delete		Title: Name: Address: City-St-Zip:	AS ( ) Change (X) Addition MULLINS, MIKE 21799 US HWY 19N CLEARWATER, FL 33765			

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.

	Flacture of Circuit of Office of Disease		D-1-
SIGNATURE:	DAVID P. COSPER	VTD	04/23/2007