

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000043003

FILED
Apr 17, 2008
Secretary of State

Entity Name: AUTONATION BENEFITS COMPANY, INC.

Current Principal Place of Business:

110 SE SIXTH STREET
20TH FLOOR
FT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

110 SE SIXTH STREET
20TH FLOOR
FT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 34-1135160 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROLLINS, KENNETH B
110 SE 6TH STREET
20TH FLOOR
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

BETHEL, ALISON E
110 SE 6TH STREET
20TH FLOOR
FT. LAUDERDALE, FL 33301 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.

SIGNATURE: ALISON E. BETHEL 04/17/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MAROONE, MICHAEL E
Address: 110 SE 6TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: DVS () Delete
Name: FERRANDO, JONATHAN P
Address: 110 SE SIXTH STREET
City-St-Zip: FT LAUDERDALE, FL 33301

Title: P () Delete
Name: CLAYTON, B. GENE
Address: 110 SE 6TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: AS () Delete
Name: EDMUNDS, C. COLEMAN G
Address: 110 SE 6TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: T () Delete
Name: TEUFEL, JAMES J
Address: 110 SE 6TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: B. GENE CLAYTON P 04/17/2008
Electronic Signature of Signing Officer or Director Date