


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

FILED
May 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # S38161 (3)		
1. Corporation Name BUDDY HUTCHINSON CARS, INC.		



Principal Place of Business 3919 PHILLIPS HIGHWAY JACKSONVILLE FL 32207	Mailing Address 3919 PHILLIPS HIGHWAY JACKSONVILLE FL 32207-6832
---	--

2. Principal Place of Business 21 10564 PHILIPS HIGHWAY Suite, Apt. #, etc.		2a. Mailing Address 26 SAME Suite, Apt. #, etc.		3. Date Incorporated or Qualified 03/15/1991	3a. Date of Last Report 04/01/1996
22 City & State 23 JACKSONVILLE, FLORIDA Zip 24 32256		27 City & State 28 Zip 29		4. FEI Number 59-3055537	Applied For Not Applicable
Country 25 US		Country 30		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent HUTCHINSON, MILFORD F. 3919 PHILLIPS HIGHWAY JACKSONVILLE FL 32207		10. Name and Address of New Registered Agent	
		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD HUTCHINSON, MILFORD F.	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5323 PHILLIPS HIGHWAY	1.2 NAME	
STREET ADDRESS	JACKSONVILLE FL	1.3 STREET ADDRESS	10564 PHILIPS HIGHWAY
CITY, ST, ZIP		1.4 CITY-ST-ZIP	JACKSONVILLE, FLORIDA 32256
TITLE	VSD ESCUDE, MARK C.	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5323 PHILLIPS HIGHWAY	2.2 NAME	
STREET ADDRESS	JACKSONVILLE FL	2.3 STREET ADDRESS	
CITY, ST, ZIP		2.4 CITY-ST-ZIP	
TITLE	S. STRICKLAND, CAROL	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	5323 PHILLIPS HIGHWAY	3.2 NAME	JOYNER, JOHNATHAN H.
STREET ADDRESS	JACKSONVILLE FL	3.3 STREET ADDRESS	10564 PHILIPS HIGHWAY
CITY, ST, ZIP		3.4 CITY-ST-ZIP	JACKSONVILLE, FLORIDA 32256
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, and is accompanied by an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/23/97 (904) 448-3151

CR2E034 (9/96)