

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S45825** (4)

WINTER HAVEN CHRYSLER PLYMOUTH DODGE JEEP EAGLE, INC.

APPROVED
FILED

MAY - 1 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Office: 190 AVENUE K S.W.
WINTER HAVEN FL 33880

Mailing Address: 190 AVENUE K S.W.
WINTER HAVEN FL 33880

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business:

2b. Mailing Address:

22. State, Apt. # etc:

27. State, Apt. # etc:

23. City & State:

28. City & State:

24. Zip:

25. County:

29. Zip:

30. County:

3. Date incorporated or qualified:

04/12/1991

3a. Date of last Report:

05/01/1994

4. FFI Number:

59-3063063

Applied For:

Not Applicable

5. Certificate of Status Desired:

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution:

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes:

☒ Yes ☐ No

9. Name and Address of Current Registered Agent:

10. Name and Address of New Registered Agent:

QUINTON, A. E., JR.
80 S.W. 8TH ST.
SUITE 2804
MIAMI FL 33130

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 607.0892 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 607.0892, Florida Statutes.

SIGNATURE:

12. OFFICERS AND DIRECTORS:

1. NAME	D MAHALAK, RALPH E.
2. STREET ADDRESS	190 AVE. K S.W.
3. CITY & STATE	WINTER HAVEN FL
4. NAME	
5. STREET ADDRESS	
6. CITY & STATE	
7. NAME	
8. STREET ADDRESS	
9. CITY & STATE	
10. NAME	
11. STREET ADDRESS	
12. CITY & STATE	
13. NAME	
14. STREET ADDRESS	
15. CITY & STATE	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12:

1. NAME	P/T/I/S/D	☒ Change ☐ Addition
2. NAME	MAHALAK, RALPH E	
3. STREET ADDRESS	190 AVE K S.W.	
4. CITY & STATE	WINTER HAVEN FL 33880	
5. NAME	V	☐ Change ☒ Addition
6. NAME	MICHAEL MAHALAK	
7. STREET ADDRESS	190 AVE K S.W.	
8. CITY & STATE	WINTER HAVEN, FL 33880	
9. NAME	ASSISTANT S/T	☐ Change ☒ Addition
10. NAME	LOIS POWELL	
11. STREET ADDRESS	190 AVE K S.W.	
12. CITY & STATE	WINTER HAVEN, FL 33880	
13. NAME		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY & STATE		
17. NAME		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY & STATE		

14. I, the undersigned, certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Sections 607.0892, Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 at the time of the filing of this report as required by Chapter 607, Florida Statutes, and that my name appears in the filing of this report or on another document with an address.

SIGNATURE: X

Lois Powell LOIS POWELL Sec. Treas. 4/27/95 818-299-1243
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR