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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **S77309**

1. Corporation Name

GORDON CHEVROLET, INC.

		<u> </u>						
Principal Place of Business Mailing Address								
1166 BLANDING P.O. BOX 0307 ORANGE PARK		1166 BLANDING BLVD P.O. BOX 0307 ORANGE PARK FL 32067				DO NOT WRITE IN TH	S SPACE	
O,111102 1711111	. 2					3. Date Incorporated or Qualifed 09/03/1991		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	A	pplied For
21		26				59-3081181	N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22		27 –				J. Comment of Status Desired		equired
City & State	e	City & State	28			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip	Country	Zip	_ Cou	ntry		8. This corporation owes the current year I		
24	25	29 3	0	_		Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New Registere	1 Agent	
DAM	S DAUL C			• •	Marile			
	IS, PAUL C. HARBOUR PLACE			82	Street Add	Iress (P.O. Box Number is Not Acceptable)		
	H FLOOR			83				}
TAM	PA FL 33602			84	City		85 Zip	Code
				[[•	<u></u>		ſ
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was aut	norizeo	1 DV 1	the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	ointment as re	egistered
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: R	egistered	Agent	t signature require	ed when reinstating) DATE		
12.		ND DIRECTORS	13.		· organia	ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
TITLE	D	☐ DELETE	1.1 TI	TLE			Change	Addition
NAME	STEWART, GORDON L.		1.2 N	AME				
STREET ADDRESS	31850 FORD RD.		1.3 ST	REET	ADDRESS			
CITY-ST-ZIP	GARDEN CITY MI			TY-ST	-ZIP			
TITLE		DELETE 2.1		TLE			☐ Change	Addition
NAME			2.2 N	AME	ł			1
STREET ADDRESS			2.3 S	TREET	ADDRESS			
CITY-ST-ZIP			2.40	ITY-S	T-ZIP	••*		
TITLE		☐ DELETE	3.1 TI	TLE			Change	Addition
NAME			3.2 N	AME				Ì
STREET ADDRESS			3.3 S	TREET	ADDRESS			}
CITY-ST-ZIP			3.4. 0	ITY-S	T-ZIP			
TITLE		☐ DELETE	4.1 Ti	ΠE			Change	Addition
NAME			4. 2 N	IAME				}
STREET ADDRESS			4.3 S	TREET	ADORESS			
CITY-ST-ZIP,			4.4 C	ITY-\$1	r-2IP			
TITLE		☐ DELETE	5.1 Tt		ĺ		Change	Addition
NAME			5.2 N					ļ
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				TY-81	r-zip			
TITLE		☐ DELETE	6.1 TI				☐ Chan g e	Addition
NAME	1		6.2 N					- 1
STREET ADDRESS	ì		6.3 S	REET	ADDRESS			

14. I 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 suppliemental 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 trastee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPES OR

FILED

Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90073 002 ***150.00