

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

FILED

98 MAY -1 PM 3:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **S81933** (1)

1. Corporation Name

**DEALERSHIP ACCOUNTING SERVICES, INC.**



Principal Place of Business

Mailing Address

**350 SOUTH LAKE DESTINY DRIVE  
ORLANDO FL 32810**

**350 SOUTH LAKE DESTINY DRIVE  
ORLANDO FL 32810**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**09/23/1991**

4. FEI Number

**59-3138671**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

**110 S.E. 6th Street**

Suite, Apt. #, etc

Suite, Apt. #, etc.

22

27

**20th Floor**

City & State

City & State

23

28

**Ft. Lauderdale, FL**

Zip

Country

Zip

Country

24

25

29

**33301**

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HUMPHRIES, J. GREGORY  
20 N. ORANGE AVE.  
SUITE 1000  
ORLANDO FL 32801-4626**

81 Name

**CT Corporation Systems**

82 Street Address (P.O. Box Number is Not Acceptable)

**1200 S. Pine Island Road**

83

84 City

**Plantation**

FL

85 Zip Code

**33324**

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 607.1508, Florida Statutes.

SIGNATURE

*Connie Bryan*  
Signature, typed or printed name of registered agent and date if applicable

**CONNIE BRYAN  
SPECIAL ASSISTANT SECRETARY**

(NOTE: Registered Agent signature required when reinstating)

**5/11/98**

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **DTS**  
STREET ADDRESS **PEACOCK, W. WARNER**  
CITY-ST-ZIP **350 S. LAKE DESTINY DR.  
ORLANDO FL**

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME **V**  
1.3 STREET ADDRESS **200002515532--4**  
1.4 CITY-ST-ZIP **-05/07/98--01081--018  
\*\*\*\*150.00 \*\*\*\*150.00**

TITLE ☐ DELETE  
NAME **PD**  
STREET ADDRESS **MEALEY, DONALD C.**  
CITY-ST-ZIP **350 S. LK DESTINY DRIVE  
ORLANDO FL**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME **P**  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition  
3.2 NAME **SD**  
3.3 STREET ADDRESS **COLE, JAMES O.**  
3.4 CITY-ST-ZIP **110 S.E. 6th Street  
Ft. Lauderdale, FL 33301**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME **T**  
4.3 STREET ADDRESS **HYLE, KATHLEEN**  
4.4 CITY-ST-ZIP **110 S.E. 6th Street  
Ft. Lauderdale, FL 33301**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition  
5.2 NAME **D**  
5.3 STREET ADDRESS **HAWKINS, THOMAS**  
5.4 CITY-ST-ZIP **110 S.E. 6th Street  
Ft. Lauderdale, FL 33301**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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 if changed, or on an attachment with an address.

CP2E034 (10/97)