

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

DOCUMENT # S81933 (1)
1. Corporation Name
DEALERSHIP ACCOUNTING SERVICES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business: **350 SOUTH LAKE DESTINY DRIVE ORLANDO FL 32810**
Mailing Address: **350 SOUTH LAKE DESTINY DRIVE ORLANDO FL 32810**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date incorporated or Qualified	
21	Suite, Apt. #, etc	26	110 S.E. 6th Street	09/23/1991	
22	City & State	27	20th Floor	4. FEI Number	
23	Zip	28	Ft. Lauderdale, FL	59-3138671	
24	Country	29	33301	Applied For	
		30		Not Applicable	
				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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
HUMPHRIES, J. GREGORY
20 N. ORANGE AVE.
SUITE 1000
ORLANDO FL 32801-4626

10. Name and Address of New Registered Agent
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 **CONNIE BRYAN**
SPECIAL ASSISTANT SECRETARY
DATE: **5/1/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DTS <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEACOCK, W. WARNER	1.2 NAME	
STREET ADDRESS	350 S. LAKE DESTINY DR.	1.3 STREET ADDRESS	200002515532--4
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	-05/07/98--01081--018
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEALEY, DONALD C.	2.2 NAME	
STREET ADDRESS	350 S. LK DESTINY DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	COLE, JAMES O.
STREET ADDRESS		3.3 STREET ADDRESS	110 S.E. 6th Street
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	HYLE, KATHLEEN
STREET ADDRESS		4.3 STREET ADDRESS	110 S.E. 6th Street
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	HAWKINS, THOMAS
STREET ADDRESS		5.3 STREET ADDRESS	110 S.E. 6th Street
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

4-5-1-98

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.

CR2E034 (10/97)