2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S95391

FILED Jan 24, 2008 Secretary of State

Entity Name: ARCADIA CHEVROLET-GEO-BUICK-OLDSMOBILE-PONTIAC, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	H BREVARD , , FL 33821	AVE.		
Current Mailing Address:		New Mailing Address:		
	H BREVARD , , FL 33821	AVE.		
FEI Number	: 65-0296765	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
210 SOUT	R, DOUGLAS TH BREVARD : , FL 33821			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
	e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
n the State	e of Florida. [*] RE:	submits this statement for the nic Signature of Registered Ag		ed office or registered agent, or both, Date
in the State	e of Florida. RE: Electror			
in the State	e of Florida. RE: Electror	nic Signature of Registered Ag g Trust Fund Contribution ().	ent	
in the State	e of Florida. RE: Electror mpaign Financin S AND DIREC	nic Signature of Registered Ag g Trust Fund Contribution (). TORS:) Delete DUG, TRAIL DR	ent	Date
in the State SIGNATUI Election Car OFFICER: Title: Name: Address:	e of Florida. RE: Electron mpaign Financin S AND DIREC DP (PLATTNER, DO 3118 WALTER SARASOTA, FI	nic Signature of Registered Ag g Trust Fund Contribution (). TORS:) Delete DUG, TRAIL DR - 34240) Delete BRA A.,	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS D. PLATTNER DP 01/24/2008