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CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 19 AM 9:48

DOCUMENT # V32606

(8)

1. Corporation Name

CARROLL PONTIAC-BUICK-GMC TRUCK, INC.

Principal Place of Business

2499 N. ORANGE BLOSSOM TRAIL
KISSIMMEE FL 34741
US

Mailing Address

2499 N ORANGE BLOSSOM TRAIL
KISSIMMEE FL 34741
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/27/1992

3a. Date of Last Report

01/20/1994

4. FEI Number

59-3121590

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

2. Principal Place of Business

21 Guide, Apt. #, etc.

22 City & State

23 Zip

Country

2b. Mailing Address

26 Guide, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

RITCH, JOHN B.
100 CHURCH ST
KISSIMMEE FL 34741

10. Name and Address of New Registered Agent

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 607.0502 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable

NOTE: Registered Agent signature required after amendments.

(Att)

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

STARLING, ALAN C.
1380 GRANDVIEW BLVD
KISSIMMEE FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

THACKER, CATHY C
814 HASTINGS DR
KISSIMMEE FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

☐ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is substantially true and correct and that I am an officer or director of the corporation or the registered agent or transferee of the corporation to execute this report as required by Chapter 1907, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Cathy C Thacker Secretary CATHY C THACKER 1/11/95 (407) 847-8122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR