

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 19 PM 12:58

DOCUMENT # 014843 (7)
1. Corporation Name
WARREN WOOTEN FORD, INC.

DO NOT WRITE IN THIS SPACE.

| | | | | | |
|----------------------------------|---------------------|----------------------------------|----------------|---|--------------------------------|
| Principal Place of Business | | Mailing Address | | 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| 1360 W KING ST COCOA FL 32922 | | 1360 W KING ST COCOA FL 32922 | | 12/18/1924 | 06/17/1994 |
| 2. Principal Place of Business | 2a. Mailing Address | 4. FEI Number | Applied For | | |
| 21 | 26 | 59-0452670 | Not Applicable | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| 22 | | 27 | | <input checked="" type="checkbox"/> | |
| City & State | | City & State | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| 23 | | 28 | | <input type="checkbox"/> | |
| Zip | Country | Zip | Country | 8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes | |
| 24 | 25 | 29 | 30 | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | | | | | | | |
|---|--|--|--|---|---|----|-------------|
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | | |
| WOOTEN, FRANK DANIEL 730 ELLIOT DR. MERRITT ISLAND FL 32952 | | | | B1 Name | FRANK DANIEL WOOTEN | | |
| | | | | B2 Street Address (P.O. Box Number is Not Acceptable) | 526 PAUMA VALLEY CRT. MELBOURNE, FL 32940 | | |
| | | | | B3 | 704 NICKLAUS DR. DELVE | | |
| | | | | B4 City | Melbourne | FL | B5 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 _____ DATE _____
Signature, typed or printed name of registered agent and box if applicable. (NOTE: The printed Agent signature required when registering)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-----------------------|---|----------------------|
| TITLE | PST | 1.1 TITLE | PST |
| NAME | WOOTEN, FRANK D. | 1.2 NAME | FRANK D. WOOTEN |
| STREET ADDRESS | 526 PAUMA VALLEY CRT. | 1.3 STREET ADDRESS | 704 NICKLAUS DR. |
| CITY - ST - ZIP | MELBOURNE FL | 1.4 CITY - ST - ZIP | MELBOURNE, FL. 32940 |
| TITLE | V | 2.1 TITLE | V |
| NAME | WOOTEN, DAVID B. | 2.2 NAME | WOOTEN, DAVID |
| STREET ADDRESS | 1881 BRITT RD. | 2.3 STREET ADDRESS | 2615 WAGON ROAD |
| CITY - ST - ZIP | COCOA FL | 2.4 CITY - ST - ZIP | COCOA, FL. 32982 |
| TITLE | | 3.1 TITLE | |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 3.4 CITY - ST - ZIP | |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 4.4 CITY - ST - ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 5.4 CITY - ST - ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 6.4 CITY - ST - ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE: Frank D. Wooten 1/10/95 707-632-2222
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE (Typed Name #)