

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000043003

**Entity Name:** AUTONATION BENEFITS COMPANY, INC.

**Current Principal Place of Business:**

200 SW 1ST AVE.  
14TH FLOOR  
FT LAUDERDALE, FL 33301

**Current Mailing Address:**

200 SW 1ST AVE.  
14TH FLOOR  
FT LAUDERDALE, FL 33301

**FEI Number:** 34-1135160

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DVS  
Name EDMUNDS, COLEMAN  
Address 200 SW 1ST AVE. 14TH FLOOR  
City-State-Zip: FT LAUDERDALE FL 33301

Title P  
Name REDMAN, MAUREEN  
Address 200 SW 1ST AVE. 14TH FLOOR  
City-State-Zip: FORT LAUDERDALE FL 33301

Title T  
Name SCHOENBORN, DAVID  
Address 200 SW 1ST AVE. 14TH FLOOR  
City-State-Zip: FORT LAUDERDALE FL 33301

*I hereby 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 all other like empowered.*

**SIGNATURE:** MAUREEN REDMAN

**PRESIDENT**

**04/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date