

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08360

Entity Name: HOLMAN AUTOMOTIVE GROUP, INC.

Current Principal Place of Business:

244 E. KINGS HIGHWAY
MAPLE SHADE, NJ 08052

Current Mailing Address:

244 E. KINGS HIGHWAY
MAPLE SHADE, NJ 08052

FEI Number: 21-0610247

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 DIRECTOR
Name HOLMAN, JOSEPH S
Address 244 E. KINGS HIGHWAY
City-State-Zip: MAPLE SHADE NJ 08052

Title DIRECTOR
Name HOLMAN, MELINDA K
Address 14 KENDLES RUN ROAD
City-State-Zip: MOORESTOWN NJ 08057

Title DIRECTOR
Name MULLIN, KATHERINE A
Address 757 PADDOCK PATH
City-State-Zip: MOORESTOWN NJ 08057

Title TREASURER
Name HORWITH, BRIAN K
Address 4545 SPRINGFIELD DRIVE
City-State-Zip: COPLAY PA 18037

Title SECRETARY
Name ANDREOLA, ALBERT V.
Address 244 E. KINGS HIGHWAY
City-State-Zip: MAPLE SHADE NJ 08052

Title PRESIDENT
Name ORTELL, CARL A.
Address 730 GOLF VIEW ROAD
City-State-Zip: MOORESTOWN NJ 08057

Title DIRECTOR
Name BEIDEMAN, FRANK H.
Address 244 E. KINGS HIGHWAY
City-State-Zip: MAPLE SHADE NJ 08052

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: ALBERT V. ANDREOLA

SECRETARY

04/22/2016

Electronic Signature of Signing Officer/Director Detail

Date