

**2014 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           V  
Name           NAUGLE, SCOTT A  
Address        244 E. KINGS HIGHWAY  
City-State-Zip: MAPLE SHADE NJ 08052

Title           PRESIDENT, DIRECTOR  
Name           HOLMAN, MELINDA K  
Address        244 E. KINGS HIGHWAY  
City-State-Zip: MAPLE SHADE NJ 08052

Title           VP  
Name           MULLIN, KATHERINE A  
Address        244 E. KINGS HIGHWAY  
City-State-Zip: MAPLE SHADE NJ 08052

Title           SECRETARY, DIRECTOR  
Name           BATES, BRIAN R  
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:** BRIAN R. BATES

**SECRETARY**

**04/30/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date