2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000101076

Entity Name: S4 AUTOMOTIVE INC.

Current Principal Place of Business:

1845 UNIVERSITY PKWY SARASOTA, FL 34243

Current Mailing Address:

1845 UNIVERSITY PKWY SARASOTA, FL 34243 US

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

LEASECORP INC 5811 DRIFTWOOD AVE SARASOTA, FL 34231 US

FILED Apr 22, 2014

Secretary of State

CC7937103779

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

P	Title	SECRETARY
LEASECORP INC	Name	GIBBS, ERIC D
5811 DRIFTWOOD AVE	Address	1845 UNIVERSITY PKWY
SARASOTA FL 34231	City-State-Zip:	SARASOTA FL 34243
TREASURER	Title	ASST. SECRETARY
HOVERSON, BRIAN D	Name	ROJAS, LEONIDAS
1845 UNIVERSITY PKWY	Address	1845 UNIVERSITY PKWY
SARASOTA FL 34243	City-State-Zip:	SARASOTA FL 34243
SARASOTA FL 34243 ASST. TREASURER	City-State-Zip: Title	SARASOTA FL 34243 CHAIRMAN
ASST. TREASURER	Title	CHAIRMAN
ASST. TREASURER MCINTYRE, JOSEPH R	Title Name	CHAIRMAN STRAUGHN, JAMES A
ASST. TREASURER MCINTYRE, JOSEPH R 1845 UNIVERSITY PKWY	Title Name Address	CHAIRMAN STRAUGHN, JAMES A 1845 UNIVERSITY PKWY
ASST. TREASURER MCINTYRE, JOSEPH R 1845 UNIVERSITY PKWY SARASOTA FL 34243	Title Name Address City-State-Zip:	CHAIRMAN STRAUGHN, JAMES A 1845 UNIVERSITY PKWY SARASOTA FL 34243
ASST. TREASURER MCINTYRE, JOSEPH R 1845 UNIVERSITY PKWY SARASOTA FL 34243 VC	Title Name Address City-State-Zip: Title	CHAIRMAN STRAUGHN, JAMES A 1845 UNIVERSITY PKWY SARASOTA FL 34243 CO-TRUSTEE
	LEASECORP INC 5811 DRIFTWOOD AVE SARASOTA FL 34231 TREASURER HOVERSON, BRIAN D	LEASECORP INC Name 5811 DRIFTWOOD AVE Address SARASOTA FL 34231 City-State-Zip: TREASURER Title HOVERSON, BRIAN D Name

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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: LEASECORP

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	DIRECTOR
Name	VERVILLE, RYAN
Address	1845 UNIVERSITY PKWY
City-State-Zip:	SARASOTA FL 34243