

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90106 037 ****61.25

DOCUMENT # 703605

1. Entity Name

CENTRAL FLORIDA AUTO DEALERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**7380 SAND LAKE RD
 SUITE 500
 ORLANDO FL 32819**

**7380 SAND LAKE RD
 SUITE 500
 ORLANDO FL 32819**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1111836

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**G. CHARLES WOHLUST
 230 LOOKOUT PLACE
 MAITLAND FL 32751**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, FRANK J 5700 E. COLONIAL DRIVE ORLANDO FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M MILLER, BARBARA A. 7380 SAND LAKE RD STE 500 ORLANDO FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NERO, WILLIAM A 12801 S ORANGE BLOSSOM TR ORLANDO FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD NAHAS, GEORGE E 200 E BURLEIGH AVE TAVARES FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOLLER, CHRISTOPHER 301 S ORLANDO AVE SYE 200 MAITLAND FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ROGERS, JILL H 301 S ORLANDO AVE STE 200 MAITLAND FL	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Barbara A. Miller* **BARBARA A. Miller** 2/24/01 407/352-5243
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0027487

CR2E037 (10/00)

CENTRAL FLORIDA AUTO DEALERS ASSOCIATION, INC.

FEI Number: 59-1111836

703605

2001 non-profit Corporation Annual Report continued:

13. Officers and Directors

S/T/D

Chavara, Joe
2055 W. Colonial Dr
Orlando FL

D

Collier, Michael A.
3920 W. Colonial Dr
Orlando FL

D

Jack Salzman
485 E. Semoran Blvd
Fern Park FL

D

Matthews, Irving J.
17701 U.S. Hwy. 441
Mt. Dora FL

D

Smith, Mike
4101 W. Colonial Dr
Orlando FL

D

Stephens, W. W. (Bo)
3883 W. Colonial Dr
Orlando FL