

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90103 046 ***150.00

NE030378 AV

DOCUMENT # P01000008059

1. Entity Name

QUALITY AUTO & TRUCK SALES, INC.

Principal Place of Business

**954 EAST SILVER SPRINGS BLVD., STE. 101
 OCALA FL 34470**

Mailing Address

**954 EAST SILVER SPRINGS BLVD., STE. 101
 OCALA FL 34470**

2. Principal Place of Business

2612 N. Magnolia Ave

3. Mailing Address

2612 N. Magnolia Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ocala, FL.

City & State

Ocala, FL.

4. FEI Number

59-3692613

Applied For

Not Applicable

Zip

34475

Country

Marion

Zip

34475

Country

Marion

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

WILSON, ROBERT D

**954 EAST SILVER SPRINGS BLVD., STE. 101
 OCALA FL 34470**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

President
Paul E. Fletcher Sr. ☐ Delete
16 Almond Way
Ocala, FL 34472

V.P. / Sec. / Tres.
P. Wayne Bill ☐ Delete
1744 S.E. 39th Terr.
Ocala, FL 34471

V.P.
Paul E. Fletcher Jr. ☐ Delete
2 Pecan Ln.
Ocala, FL 34472

☐ Delete

☐ Delete

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **x Paul E. Fletcher Sr.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

x 3-30-02 / (352) 351-2816

CR2E034 (9/01)