

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000026810

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90069 024 ***158.75

1. Entity Name
ACC AUTOMOTIVE, INC.

Principal Place of Business 1657 RIDGEWOOD AVENUE HOLLY HILL FL 32117	Mailing Address 1657 RIDGEWOOD AVENUE HOLLY HILL FL 32117-1733
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1336 CENTER ST Suite, Apt. #, etc.	3. Mailing Address Same Suite, Apt. #, etc.
City & State Holly Hill	City & State FL
Zip 32117-2040	Country USA

4. FEI Number 59-3636372	Applied For <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
PRICE, ANDREW H JR
~~**1657 RIDGEWOOD AVENUE**~~
HOLLY HILL FL 32117

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
1336 Center Ave
 City **Holly Hill** FL Zip Code **32117-2040**

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 Andrew H. Price, PRES DATE 4-7-00
Signature, typed or printed name of registered agent and title, applicable. (NOTE: Registered Agent signature required when reinstating.)

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, 2000 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	
TITLE PD	<input type="checkbox"/> Delete
NAME PRICE, ANDREW H JR	
STREET ADDRESS 4 WOODLAND BLVD.	
CITY-ST-ZIP ORMOND BEACH FL 32174	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: Andrew H. Price, PRES DATE 4-7-00 DAYTIME PHONE # 904 253 0659
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)