

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 27, 2001 8:00 am**
Secretary of State

02-27-2001 90345 032 ***150.00

DOCUMENT # 158632**1. Entity Name**
ORLANDO MOTOR PARTS INC**Principal Place of Business****1207 WEST CENTRAL AVENUE**
P.O. BOX 685
ORLANDO FL 32802-685
US**Mailing Address****1207 WEST CENTRAL AVENUE**
P.O. BOX 685
ORLANDO FL 32802-685
US**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 **59-0600354**

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****LEMUEL C. JOHNSON**
1207 WEST CENTRAL AVENUE
ORLANDO FL 32802-0685

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, 2001 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****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11****TITLE** **P** ☐ Delete
NAME **JOHNSON, LEMUEL C JR**
STREET ADDRESS **1207 W CENTRAL AVE.**
CITY-ST-ZIP **ORLANDO FL 32805**☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Delete
TITLE
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STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ Addition
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CITY-ST-ZIP☐ Change ☐ Addition
TITLE
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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Doc # 158632

BAKER
&
HOSTETLER LLP
COUNSELLORS AT LAW

200 SOUTH ORANGE AVENUE • SUNTRUST CENTER, SUITE 2300 • P.O. Box 112 • ORLANDO, FLORIDA 32802-0112 • (407) 649-4000
FAX (407) 841-0168 649-4681
WRITER'S DIRECT DIAL NUMBER (407)

February 20, 2001

Annual Reports Filings
Division of Corporations
Post Office Box 1500
Tallahassee, Florida 32302-1500

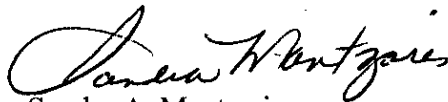
Re: 2001 Uniform Business Report for Orlando Motor Parts, Inc.
Document No. 158632

Dear Sir or Madam:

Enclosed please find the 2001 Profit Corporation Uniform Business Report for the above-referenced entity. Also enclosed is a check in the amount of \$150.00 to cover the cost of the filing fee.

If you have any questions regarding this matter, please do not hesitate to contact our office.

Very truly yours,



Sandra A. Mantzaris
Legal Assistant, Corporate Maintenance

Enclosures

cc: Barbara A. Egolf, Esq. (w/o encs.)

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