FILED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Jan 27, 2003 8:00 am **Secretary of State** DÖCÜMENT# 182262 01-27-2003 90168 046 ***150.00 1. Entity Name CITY CAB COMPANY OF ORLANDO INC Principal Place of Business Mailing Address 324 W. GORE ST 324 W GORE ST ORLANDO FL 32806 ORLANDO FL 32806 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-0729149 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SWANN & HADLEY, PA 🦠 Street Address (P.O. Box Number is Not Acceptable) 1031 W. MORSE BLVD STE 160 WINTER PARK FL 32789 City 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. I am familiar with, and accept the obligations of registered agent. 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 \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE ☐ Addition CARNS, CHARLES E JR. NAME NAME STREET ADDRESS 324 W.GORE ST. STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition MEARS JR, PAUL S NAME STREET ADDRESS 324 W GORE ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL TITLE DCOB Delete NAME MEARS, PAUL S SR. NAME STREET ADDRESS 324 W. GORE STREET STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change SEARCY, ROBERT A. NAME NAME STREET ADDRESS 324 W GORE ST. STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MEARS, JAMES L. NAME

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 changed, or on an atta

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

☐ Delete

SIGNATURE: _

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

324 W. GORE ST.

324 W. GORE ST.

MEARS, JONATHAN P.

ORLANDO FL

ORLANDO FL

Change

☐ Addition

Attachment # 182262

Document # 182262

Entity Name: City Cab Company of Orlando, Inc.

Officers and Directors:

S/CFO Baker, Timothy L. 324 W Gore Street Orlando, FL 32806