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## **2001 UNIFORM BUSINESS REPORT (UBR)**

## FILED Mar $19, \overline{2}001, 8:00$ am **DOCUMENT # 215718 Secretary of State** 1. Entity Name DELRAY LINCOLN MERCURY, INC. 03-19-2001 90065 048 \*\*\*150.00 Principal Place of Business Mailing Address 2102 SOUTH FEDERAL HIGHWAY 2102 SOUTH FEDERAL HIGHWAY DELRAY BEACH FL 33483 **DELRAY BEACH FL 33483** 817453 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-0855911 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. YOUNG, ROY TIMOTHY Street Address (P.O. Box Number is Not Acceptable) 2102 S. FEDERAL HWY. **DELRAY BEACH FL 33483** 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. 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. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 $\Box$ Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) Addition TITLE Delete TITLE Change YOUNG.EDWIN W NAME NAME STREET ADDRESS 2255 W MAYA PALM DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **BOCA RATON FL** Change ☐ Addition TITLE ☐ Delete TITLE YOUNG, ROY TIMOTHY NAME NAME STREET ADDRESS 2102 S. FED. HWY. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL ☐ Change TITLE ☐ Defete TITLE ☐ Addition YOUNG, JOHN BRUCE NAME NAME 2102 S FEDERAL HWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL TITLE Delete TITLE ☐ Change ☐ Addition WILSON, LORRAINE J NAME NAME 2102 S FEDERAL HWY. STREET ADDRESS STREET ADDRESS CITY-ST-2IP CITY-ST-7IP DELRAY BCH. FL Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

OF SIGNING OFFICER OF DIRECTOR

Delete

☐ Change

☐ Addition