

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90544 041 ***150.00

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DOCUMENT # 273344

1. Entity Name
C.R. LOVELL AUTO SUPPLY, INC.



Principal Place of Business
**214 S. SECONA ST.
LEESBURG FL 34788
US**

Mailing Address
**33323 TEWKSBURY DR
LEESBURG FL 34788
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**LOVELL, JACK
33323 TEWKSBURG DR
LEESBURG FL 34788**

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. 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
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution.

☐

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
LOVELL, JACK
33323 TEWKSBURY DR
LEESBURG FL**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
LOVELL, ROBERT C., JR.
101 S LAKESHORE DR.
LEESBURG FL**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
LOVELL, JEWELL B
101 LAKESHORE DR
LEESBURG FL**

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JACK L. LOVELL 4/25/03 (352) 728-2504

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

Attachment

70050153

2733344

Jack Lovell

33323 Tewksbury Drive
Leesburg, Florida 34788
Tel. (352) 728-2504
E-mail: EFLovell@aol.com

April 25, 2003

Florida Department of State
Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

RE: Document #273344

Entity Name: C.R. Lovell Auto Supply, Inc.

Dear Sir or Madam:

I am writing in regard to several errors which appear in portions of my form which is completed by your office. Please make the corrections as shown below.

Principal Place of Business: The correct address is "214 Second St, Leesburg Fl. 34788"
NOT 214 Secona St., Leesburg, Fl 34788

You show the principal place of business mailing address correctly, i.e 33323 TEWKSBURY DRIVE; However, the same street address for current registered agent is misspelled and shown as 33323 TEWKSBURG DR.

The correct zip code for the 101 Lakeshore Drive address is not shown; however, it is 34748.

Thank you for your attention to these corrections.

Cordially yours,

Jack L. Lovell