

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 366423

1. Entity Name

TERRY'S AUTO CENTER, INC.

FILED

Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90068 016 ***158.75

Principal Place of Business

5509 COMMERCE DR
ORLANDO FL 32839
US

Mailing Address

5509 COMMERCE DR
ORLANDO FL 32839
US

2. Principal Place of Business

5509 Commerce Dr

Suite, Apt. #, etc.

A

3. Mailing Address

P.O. Box 568514

Suite, Apt. #, etc.

Orlando, FL

City & State

City & State

Zip

Country USA

Zip

Country USA

32839

Orange

32856-8514

USA

6. Name and Address of Current Registered Agent

VANMIDDLESWORTH, TERRY D
2914 MONACO CT.
ORLANDO FL 32806

7. Name and Address of New Registered Agent

Name Terry D. Van Middlesworth

Street Address (P.O. Box Number is Not Acceptable)

90 Cimmeron Dr.

City Palm Coast

FL

Zip Code 32137

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 *Terry D. Van Middlesworth* Terry D. Van Middlesworth Pres 1/21/00
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, 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 PT
NAME VANMIDDLESWORTH, TERRY D
STREET ADDRESS 2914 MONACO CT.
CITY-ST-ZIP ORLANDO FL 32806 ☐ Delete

TITLE SVP
NAME VANMIDDLESWORTH, MARTHA M
STREET ADDRESS 2914 MONACO CT.
CITY-ST-ZIP ORLANDO FL 32806 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 90 Cimmeron Dr.
CITY-ST-ZIP Palm Coast, FL 32137

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 90 Cimmeron Dr.
CITY-ST-ZIP Palm Coast, FL 32137

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

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CITY-ST-ZIP

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

TITLE ☐ Change ☐ 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: *Terry D. Van Middlesworth* Terry D. Van Middlesworth
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 1/21/00 Daytime Phone # 407-438-3611

CR2E034 (9/99)