

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 394800

1. Entity Name

NATIONAL AUTO PROPERTIES, INC.

**FILED**  
**Apr 14, 2000 8:00 am**  
**Secretary of State**

04-14-2000 90053 001 \*\*\*450.00

Principal Place of Business

Mailing Address

1605 S MISSOURI AVENUE  
CLEARWATER FL 33756  
US

1605 S MISSOURI AVENUE  
CLEARWATER FL 33756-1220  
US

2. Principal Place of Business

3. Mailing Address

1446 COURT STREET  
Suite, Apt. #, etc.

1446 COURT STREET  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

CLEARWATER FL

City & State

CLEARWATER FL

4. FEI Number

59-1378380

Applied For

Not Applicable

Zip

33756

Country

USA

Zip

33756

Country

USA

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

ELMORE, DAVID

~~1605 SO. MISSOURI AVE.~~ 1446 COURT STREET  
CLEARWATER FL 33756

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME POLESKY, MYRA A.  
STREET ADDRESS 1900 E. WINDSONG  
CITY-ST-ZIP APACHE JUNCTION AZ 85219

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

TITLE ☐ Delete  
NAME PD  
STREET ADDRESS LEVIN, LEONARD  
CITY-ST-ZIP ~~1605 S. MISSOURI AVENUE~~  
CLEARWATER FL 33756

TITLE ☒ Change ☐ Addition  
NAME 1446 COURT STREET  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME VP  
STREET ADDRESS ELMORE, DAVID  
CITY-ST-ZIP ~~1605 SOUTH MISSOURI AVE.~~  
CLEARWATER FL 33756

TITLE ☒ Change ☐ Addition  
NAME 1446 COURT STREET  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME VPD  
STREET ADDRESS LEVIN, CAROL J.  
CITY-ST-ZIP ~~1605 S. MISSOURI AVENUE~~  
CLEARWATER FL 33756

TITLE ☒ Change ☐ Addition  
NAME VPD  
STREET ADDRESS 1446 COURT STREET  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-00 727-469-8821

Date

Daytime Phone #

CR2E034 (9/99)