2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 414636 ROBINSON MOTOR COMPANY Principal Place of Business Mailing Address P O BOX 298 P O BOX 298 MADISON FL 32340 MADISON FL 32340 2. Principal Place of Business 3. Mailing Address

Suite. Apt. #. etc.

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Delete

☐ Delete

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12.

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Name

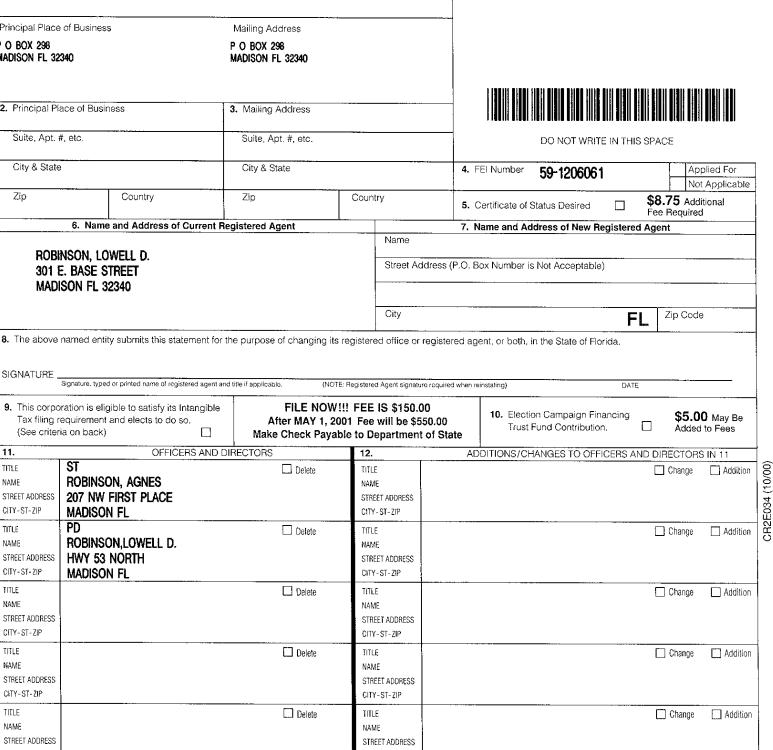
City

City & State

Zip

Mar 02, 2001 8:00 am Secretary of State

03-02-2001 90563 021 ***150.00



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 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 n address, with all other like empowered.

SIGNATURE

Suite, Apt. #, etc.

Country

ROBINSON, LOWELL D.

9. This corporation is eligible to satisfy its Intangible

ROBINSON, AGNES

MADISON FL

HWY 53 NORTH

MADISON FL

PD

207 NW FIRST PLACE

ROBINSON, LOWELL D.

Tax filing requirement and elects to do so.

(See criteria on back)

11.

TITLE

NAME

TITLE

NAME

TITLE

NAME

NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

CITY-ST-7IP

CITY-ST-7IP

301 E. BASE STREET MADISON FL 32340

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

City & State

Zip

☐ Change

Addition