

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 493643

1. Entity Name

KOONS FORD, INC.

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90046 014 ***150.00

Principal Place of Business

3101 N. STATE ROAD #7
HOLLYWOOD FL 33021

Mailing Address

3101 N. STATE ROAD #7
HOLLYWOOD FL 33021

2. Principal Place of Business

8655 Pines Blvd.

3. Mailing Address

8655 Pines Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pembroke Pines, FL

City & State

Pembroke Pines, FL

Zip
33024

Country
USA

Zip
33024

Country
USA

4. FEI Number

59-1914202

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	CARROLL, JAMES S	
STREET ADDRESS	3101 N. STATE ROAD #7	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	TAS	<input type="checkbox"/> Delete
NAME	GILES, JANET L	
STREET ADDRESS	3101 N. STATE ROAD #7	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	VP	<input type="checkbox"/> Delete
NAME	CARROLL, WILLIAM C	
STREET ADDRESS	3101 N. STATE ROAD #7	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	S	<input type="checkbox"/> Delete
NAME	TODARO, FRANK R	
STREET ADDRESS	3101 N STATE RD 7	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	VP	<input type="checkbox"/> Delete
NAME	THOMPSON, SCOTT L	
STREET ADDRESS	3101 N STATE RD 7	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	AS	<input type="checkbox"/> Delete
NAME	COKER, KELLY S	
STREET ADDRESS	3101 N STATE RD 7	
CITY-ST-ZIP	HOLLYWOOD FL 33021	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	8655 Pines Blvd.	
CITY-ST-ZIP	Pembroke Pines, FL 33024	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	8655 Pines Blvd.	
CITY-ST-ZIP	Pembroke Pines, FL 33024	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	8655 Pines Blvd.	
CITY-ST-ZIP	Pembroke Pines, FL 33024	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	8655 Pines Blvd.	
CITY-ST-ZIP	Pembroke Pines, FL 33024	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	8655 Pines Blvd.	
CITY-ST-ZIP	Pembroke Pines, FL 33024	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	8655 Pines Blvd.	
CITY-ST-ZIP	Pembroke Pines, FL 33024	

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

James S. Carroll 2/25/00

Date

Daytime Phone #

954-443-7000

CR2E034 (9/99)