

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 519305

1. Entity Name

AVON AUTO PARTS, INC.

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90071 012 ***150.00

Principal Place of Business

126 WEST MAIN ST.
AVON PARK FL 33825

Mailing Address

126 WEST MAIN ST.
AVON PARK FL 33825-3831

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1704366

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LANGSTON, LOIS F
955 E LAKE LOTELA DR
AVON PARK FL 33825

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 ☐ Delete
NAME LANGSTON, TIMOTHY A
STREET ADDRESS 2377 N ROSLYN RD
CITY-ST-ZIP AVON PARK, FL 00000

TITLE DV ☐ Delete
NAME JAHNA, PENELOPE S.
STREET ADDRESS 230 LAKE TROUT DRIVE
CITY-ST-ZIP AVON PARK, FL 00000

TITLE STD ☐ Delete
NAME LANGSTON, LOIS F
STREET ADDRESS 955 E LAKE LOTELA DR
CITY-ST-ZIP AVON PARK, FL 00000

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME Langston, Timothy A.
STREET ADDRESS 2941 N. Lancaster Rd.
CITY-ST-ZIP Avon Park, FL 33825

TITLE DV ☒ Change ☐ Addition
NAME Jahna, Penelope S.
STREET ADDRESS 270 Lake Trout Dr.
CITY-ST-ZIP Avon Park, FL 33825

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: Lois F. Langston Lois F. Langston
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 17, 2000 (863)453-3191

Date

Daytime Phone #