

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 29, 2000 08:00 AM  
Secretary of State

DOCUMENT # 655792

1. Entity Name  
BANKERS ACCEPTANCE CORPORATION

Principal Place of Business P.O. BOX 15707 ST. PETERSBURG 33733 US	FL	Mailing Address P.O. BOX 15707 ST. PETERSBURG 33733 US	FL
--	----	--	----

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number  
59-2105928

Applied For  
Not Applicable

Zip Country

Zip Country

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

DELANO G. KRISTIN  
360 CENTRAL AVENUE  
ST. PETERSBURG  
33701  
US

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

03/29/2000

(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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DEVP  
MENKE ROBERT G  
360 CENTRAL AVE  
ST PETERSBURG  
FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
MENKE ROBERT G  
360 CENTRAL AVE  
ST PETERSBURG  
FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
DELANO, G. KRISTIN  
360 CENTRAL AVE.  
ST. PETERSBURG  
FL

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CDP  
MENKE, ROBERT M.  
360 CENTRAL AVE.  
ST. PETERSBURG  
FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CD  
MENKE, ROBERT M.  
360 CENTRAL AVE.  
ST. PETERSBURG  
FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
HUSSEMAN, EDWIN C.  
360 CENTRAL AVE.  
ST. PETERSBURG  
FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
HUSSEMAN, EDWIN C.  
360 CENTRAL AVE.  
ST. PETERSBURG  
FL 33701

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MEEHAN, DAVID K.  
360 CENTRAL AVE.  
ST. PETERSBURG  
FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MEEHAN, DAVID K.  
360 CENTRAL AVE.  
ST. PETERSBURG  
FL 33701

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

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: G. KRISTIN DELANO

SD 03/29/2000