

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 22, 2001 08:00 AM**
Secretary of State**DOCUMENT # 665154**1. Entity Name
EAST COAST CAR RENTALS, INC.

Principal Place of Business

701 FISK STREET
SUITE 310
JACKSONVILLE FL
32204

Mailing Address

701 FISK STREET
SUITE 310
JACKSONVILLE FL
32204

2. Principal Place of Business

701 FISK STREET

3. Mailing Address

701 FISK STREET

Suite, Apt. #, etc.
SUITE 310Suite, Apt. #, etc.
SUITE 310City & State
JACKSONVILLE FLCity & State
JACKSONVILLE FLZip Country
32204Zip Country
322044. FEI Number
59-1981133Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LAWRENCE M. MATHENY JR & PAMELA L. WIKER
701 FISK STREET
2ND FLOOR
JACKSONVILLE FL
32204 US

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 _____ **02/22/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. 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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME LONG WILLIAM A
STREET ADDRESS 11024 N. FLORIDA AVE
CITY-ST-ZIP TAMPA FL 32204TITLE D ☐ Delete
NAME GRAHAM HENRY HJR
STREET ADDRESS 701 FISK ST., STE 200
CITY-ST-ZIP JACKSONVILLE FL 32204TITLE ☐ Delete
NAME MATHENY LAWRENCE M. J
STREET ADDRESS 701 FISK ST, SUITE 200
CITY-ST-ZIP JACKSONVILLE FL 32204TITLE P ☐ Delete
NAME IVEY, BRUCE D
STREET ADDRESS 701 FISK ST., STE 200
CITY-ST-ZIP JAX FL 32204TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME LONG WILLIAM A
STREET ADDRESS 11024 N. FLORIDA AVE
CITY-ST-ZIP TAMPA FL 33612TITLE D ☒ Change ☐ Addition
NAME GRAHAM HENRY HJR
STREET ADDRESS 701 FISK ST., STE 310
CITY-ST-ZIP JACKSONVILLE FL 32204TITLE ☒ Change ☐ Addition
NAME MATHENY LAWRENCE M
STREET ADDRESS 701 FISK ST, SUITE 200
CITY-ST-ZIP JACKSONVILLE FL 32204TITLE P ☒ Change ☐ Addition
NAME IVEY BRUCE D
STREET ADDRESS 701 FISK ST., STE 200
CITY-ST-ZIP JAX FL 32204TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: Henry H. Graham, Jr.

D

02/22/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)