

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 714030

1. Entity Name

FLORIDA INDEPENDENT TIRE DEALERS AND RETREADERS

Principal Place of Business

2255 GLADES RD
STE 324-A
BOCA RATON FL 33431
US

Mailing Address

2255 GLADES RD
STE 324-A
BOCA RATON FL 33431
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

FILED
Aug 08, 2001 8:00 am
Secretary of State

08-08-2001 90001 035 ****61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1460475 2193014

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MONDO, JILL
2255 GLADES RD STE 324-A
PMB 1000
BOCA RATON FL 33431

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

Jill K. Mondo

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7/30/01

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PED	<input type="checkbox"/> Delete
NAME	KOVAC, JOE	
STREET ADDRESS	2770 DAVIE RD	
CITY-ST-ZIP	DAVIE FL 33314	
TITLE	STD	<input type="checkbox"/> Delete
NAME	MARCOE, SHERRY	
STREET ADDRESS	1200 S BERMUDA AVE	
CITY-ST-ZIP	KISSIMMEE FL 34741	
TITLE	VD	<input type="checkbox"/> Delete
NAME	TIDWELL, JOHN	
STREET ADDRESS	15 W HIBISCUS AVE	
CITY-ST-ZIP	MELBOURNE FL 32902	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	PEREDA, DAN	
STREET ADDRESS	3850 NW 30TH AVE	
CITY-ST-ZIP	MIAMI FL 33242	
TITLE	ED	<input type="checkbox"/> Delete
NAME	MONDO, JILL	
STREET ADDRESS	2255 GLADES RD #324-A	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PAST PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CINDY MCGEE	
STREET ADDRESS	2636 LASSO LANE	
CITY-ST-ZIP	LAKELAND, FL 33801	
TITLE	PRESIDENT-ELECT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DAVID ZWALINA	
STREET ADDRESS	785 S HWY 17-92	
CITY-ST-ZIP	LONGWOOD, FL 32750	

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jill K. Mondo

7/30/01

(800) 434-8372

0010101

CFR2037 (5/01)