

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 18, 2002 8:00 am**  
**Secretary of State**

03-18-2002 90188 012 \*\*\*150.00

**DOCUMENT # F01000004422**

1. Entity Name  
**MILTON CHEVROLET, INC.**

Principal Place of Business

5925 HIGHWAY 90 W.  
 MILTON FL 32583

Mailing Address

5925 HIGHWAY 90 W.  
 MILTON FL 32583

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **58-2639195**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301-2525**

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, 2002 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	CVP	<input checked="" type="checkbox"/> Delete
NAME	MURDOCK, STEVE E	
STREET ADDRESS	5730 GLENRIDGE DR.	
CITY-ST-ZIP	ATLANTA GA	
TITLE	VCST	<input checked="" type="checkbox"/> Delete
NAME	JONES, STEVEN D	
STREET ADDRESS	5730 GLENRIDGE DR.	
CITY-ST-ZIP	ATLANTA GA	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SCHUSTER, VALERIE A	
STREET ADDRESS	100 RENAISSANCE - MC 482 A05 B45	
CITY-ST-ZIP	DETROIT MI	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURDOCK, STEVEN E	
STREET ADDRESS	5730 GLENRIDGE DR	
CITY-ST-ZIP	ATLANTA, GA 30328	
TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, STEVEN D	
STREET ADDRESS	11315 CORPORATE BLVD, STE 219	
CITY-ST-ZIP	ORLANDO FL 32814	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PRESIDENT/DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SOBH, M. LOU	
STREET ADDRESS	2473 PLEASANT HILL ROAD	
CITY-ST-ZIP	DULUTH, GA 30096	
TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LOCKLEAR, G. STEPHEN	
STREET ADDRESS	5925 HWY 90 WEST	
CITY-ST-ZIP	MILTON FL 32583	
TITLE	SECRETARY/TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRANTLEY, ELISABETH	
STREET ADDRESS	5925 HWY 90 WEST	
CITY-ST-ZIP	MILTON, FL 32583	

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 REQUIRED**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/19/02** **(407) 833-9196**  
 Date Daytime Phone #

CR2E034 (9/01)