

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 14, 2001 8:00 am
Secretary of State

03-14-2001 90013 005 ***150.00

DOCUMENT # F95000004356

1. Entity Name

WESTERN STAR TRUCKS SALES, INC.

Principal Place of Business

2076 ENTERPRISE WY. KELOWNA
BRITISH COLUMBIA, CANADA V1Y 6H8

Mailing Address

2076 ENTERPRISE WY. KELOWNA
BRITISH COLUMBIA, CANADA V1Y 6H8

2. Principal Place of Business

4420 Sherwin Road

3. Mailing Address

Suite, Apt. #, etc.

City & State

Willoughby OH

City & State

Zip

Country

44094 USA

Zip

Country

4. FEI Number

98-0154433

Applied For

Not Applicable

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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, 2001 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 DP
NAME SMITH, STEWART G
STREET ADDRESS 2076 ENTERPRISE WY, KELOWNA
CITY-ST-ZIP BRITISH COLUMBIA, CANADA V1Y 6H8 ☒ Delete

TITLE D/P
NAME Hebe, James L.
STREET ADDRESS 4747 N. Channel Ave
CITY-ST-ZIP Portland, OR 97217 ☐ Change ☒ Addition

TITLE T
NAME BURKE, DAVID
STREET ADDRESS 2076 ENTERPRISE WAY, KELOWNA
CITY-ST-ZIP BRITISH COLUMBIA CA V1Y6H ☒ Delete

TITLE D/S
NAME Hubler, James T.
STREET ADDRESS 4747 N. Channel Ave
CITY-ST-ZIP Portland, OR 97217 ☐ Change ☒ Addition

TITLE V
NAME THOMAS MCEVOY
STREET ADDRESS #203-2627 SANDY PLAINS RD.
CITY-ST-ZIP MARIETTA GA ☒ Delete

TITLE T
NAME Platt, Kelley S.
STREET ADDRESS 4747 N. Channel Ave
CITY-ST-ZIP Portland, OR 97217 ☐ Change ☒ Addition

TITLE V
NAME WILLIAMSON, ANDREW
STREET ADDRESS 2076 ENTERPRISE WY, KELOWNA
CITY-ST-ZIP KELOWNA BC V1Y 6H8 ☒ Delete

TITLE VP
NAME Merrifield, John
STREET ADDRESS 4420 Sherwin Rd
CITY-ST-ZIP Willoughby, OH 44094 ☐ Change ☒ Addition

TITLE S
NAME OLSON, DONNA L
STREET ADDRESS 2076 ENTERPRISE WAY
CITY-ST-ZIP KELOWNA BC V1Y 6H8 ☒ Delete

TITLE D
NAME Schnell, Uao
STREET ADDRESS 4747 N. Channel Ave
CITY-ST-ZIP Portland, OR 97217 ☐ Change ☒ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)