FILED

Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90434 046 \*\*\*150.00

CR2E034 (10/02)

## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

## F96000000712 DOCUMENT #

COLONIAL SALES - LEASE - RENTALS, INC.



Principal Place of Business Mailing Address WAYNE'S WORLD RV SUPERCENTER WAYNE'S WORLD RV SUPERCENTER 70006199 7157 W HIGHWAY 98 6400 1ST AVE. SOUTH PANAMA CITY FL 32407 BIRMINGHAM AL 35212 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 63-0805624 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LUTLEY, WAYNE Street Address (P.O. Box Number is Not Acceptable) 7157 W HIGHWAY 98 PANAMA CITY FL 32407 City 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. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition LUTLEY, WAYNE NAME 1020 WINCHESTER DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL 35235** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME LUTLEY, BRAD NAME STREET ADDRESS 1020 WINCHESTER DR STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL 35235** CITY-ST-7IP TITLE ☐ Delete TITLE · D-Change - Addition NAME LUTLEY, SHAY NAME 1020 WINCHESTER DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL 35235** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if

SIGNATURE: \_SHAY CUTLEY

<del>-7-03 (205)595-515</del>0