2002 UNIFORM BUSINESS REPORT (UBR)

May 29, 2002 8:00 am Secretary of State F96000004138 DOCUMENT # 1. Entity Name GAINESVILLE AUTO SUPPLY, INC. 05-29-2002 90683 040 ***550 00 Principal Place of Business Mailing Address 600 NE 23RD AVE 600 NE 23RD AVE 435810 GAINESVILLE FL 32609 GAINESVILLE FL 32609 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3385449 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MEEKS, GEORGE A Street Address (P.O. Box Number is Not Acceptable) 600 NE 23RD AVE **GAINESVILLE FL 32609** 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. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. D۷ TITLE Delete TITLE: Change ■ Addition BARBEE, MIKE NAME NAME 5420 PEACHTREE IND BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NORCROSS GA 30350 CITY-ST-ZIP TITLE DS Delete TITLE DS Change **Addition** MIKE FOST NAME JONES, MARTIN H NAME 1090 Haine STREET ADORESS 1742 EQUESTRIAN TR STREET ADDRESS 32257 CITY-ST-ZIP ODESSA FL 33556 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME MEEKS, GEORGE A NAME: STREET ADDRESS 600 NE 23RD AVE STREET ADDRESS CITY-ST-ZIP **GAINESVILLE FL 32609** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MEEKS, KIMBERLY NAME NAME STREET ADDRESS 600 NE 23RD AVE STREET ADDRESS CITY+ST-ZIP **GAINESVILLE FL 32609** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition SUSOR, ROBERT J NAME NAME STREET ADDRESS 2999 CIR 75 PKWY STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30339 CITY-ST-ZIP Defete TITLE Change ☐ Addition SMITH, SCOTT NAME NAME STREET ADDRESS 2999 CIRCLE 75 PARKWAY STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30339 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

with all other like empowered

changed, or on an attachment with an address,

SIGNATURE:

FILED