

2000 UNIFORM BUSINESS REPORT (UBR)

1/2

FILED

Apr 28, 2000 8:00 am
Secretary of State

01-26-2000 90133 019 ***150.00

DOCUMENT # F97000005862

1. Entity Name

MAUDLIN INTERNATIONAL TRUCKS, INC.

Principal Place of Business

2300 S. DIVISION AVE.
ORLANDO FL 32805

Mailing Address

2300 S. DIVISION AVE.
ORLANDO FL 32805-6233

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3474821

Applied For
Not

Zip

Country

Zip

Country

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, 2000 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 P
NAME MAUDLIN, JOHN A
STREET ADDRESS 102 RED SKY CT
CITY-ST-ZIP LAKE MARY FL 32746 ☐ Delete

TITLE V
NAME MCMAHON, CHARLES E
STREET ADDRESS 1514 CARROL CT.
CITY-ST-ZIP DARIEN IL 60561 ☒ Delete

TITLE ST MENSA
NAME MARCRUM, SHERMAN L
STREET ADDRESS 197 FALCON CT.
CITY-ST-ZIP BLOOMINGDALE IL 60108 ☐ Delete

TITLE AST
NAME ARENDS, KENNETH L
STREET ADDRESS 1512 TULAN
CITY-ST-ZIP NAPERVILLE IL 60565 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V
NAME KING, DENNIS O.
STREET ADDRESS 1214 CANNELWOOD CT.
CITY-ST-ZIP AURORA, IL 60504 ☒ Change ☐ Addition

TITLE ST
NAME WILLIAM T. WILSON
STREET ADDRESS 120 BLUE STONE CIRCLE
CITY-ST-ZIP WILSON GARDEN FL 34787 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 #

4-7-849-611