

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000000722

1. Entity Name

AUTO-BY-TEL ACCEPTANCE CORPORATION

FILED

60 JAN 31 AM 8:37

Principal Place of Business

Mailing Address

18872 MACARTHUR BLVD. 2ND FL  
IRVINE CA 92612-1400

18872 MACARTHUR BLVD. 2ND FL  
IRVINE CA 92612-1448

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

18872 MacArthur Blvd.

3. Mailing Address

18872 MacArthur Blvd.

Suite, Apt. #, etc.

3rd Floor, Legal Dept.

Suite, Apt. #, etc.

3rd Floor, Legal Dept.

City & State

Irvine, CA

City & State

Irvine, CA

Zip

92612-1400

Country

Zip

92612-1400

Country

4. FEI Number

33-0711570

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

NATIONAL REGISTERED AGENTS, INC.  
526 E. PARK AVENUE  
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

C T Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

City

Plantation

FL

Zip Code  
33324

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 ☐ Delete  
NAME DELIGATTA, ANN M  
STREET ADDRESS 18872 MACARTHUR BLVD., 2ND FL  
CITY-ST-ZIP IRVINE CA

TITLE VCFO ☐ Delete  
NAME PRINTER, HOSHI  
STREET ADDRESS 18872 MACARTHUR BLVD., 2ND FL  
CITY-ST-ZIP IRVINE CA

TITLE AS ☒ Delete  
NAME PRINTER, HOSHI  
STREET ADDRESS 18872 MACARTHUR BLVD., 2ND FL  
CITY-ST-ZIP IRVINE CA

TITLE V ☒ Delete  
NAME COMPANGANO, JEFF  
STREET ADDRESS 18872 MACARTHUR BLVD, 2ND FL  
CITY-ST-ZIP IRVINE CA 92612-1400

TITLE SD ☒ Delete  
NAME FOSTER, CRAIG S  
STREET ADDRESS 18872 MACARTHUR BLVD, 2ND FL  
CITY-ST-ZIP IRVINE CA 92612-1400

TITLE D ☐ Delete  
NAME LORIMER, MARK W  
STREET ADDRESS 152 WEST 57TH STREET  
CITY-ST-ZIP NEW YORK NY

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Change ☒ Addition  
NAME Ann M. Delligatta  
STREET ADDRESS 18872 MacArthur Blvd.  
CITY-ST-ZIP Irvine, CA 92612-1400

TITLE ☐ Change ☐ Addition  
NAME 000003128720--4  
STREET ADDRESS -02/09/00--01008--005  
CITY-ST-ZIP \*\*\*\*150.00 \*\*\*\*150.00

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

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

TITLE S ☐ Change ☒ Addition  
NAME Ariel Amir  
STREET ADDRESS 18872 MacArthur Blvd.  
CITY-ST-ZIP Irvine, CA 92612-1400

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ariel Amir

1/25/2000

(949) 225-4500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #