

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2002 8:00 am
Secretary of State

01-28-2002 90024 031 ***150.00

DOCUMENT # F99000002867

1. Entity Name
WINTER HAVEN FORD, INC.

Principal Place of Business

3015 LAKE ALFRED ROAD
WINTER HAVEN FL 33881

Mailing Address

3015 LAKE ALFRED ROAD
WINTER HAVEN FL 33881

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3582422

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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, 2002 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 **DV** ☐ Delete
NAME **KILBRIDE, B L**
STREET ADDRESS **MAIL DROP 1SW-C/16800 EXECUTIVE PLAZA DR**
CITY-ST-ZIP **DEARBORN MI 48126**

TITLE **D** ☐ Delete
NAME **CREAMEAN, W. A**
STREET ADDRESS **MAIL DROP-1SW-C/16800 EXECUTIVE PLAZA DR**
CITY-ST-ZIP **DEARBORN MI 48126**

TITLE **D** ☐ Delete
NAME **MATTINGLY, R. C**
STREET ADDRESS **MAIL DROP 1SW-C/16800 EXECUTIVE PLAZA DR**
CITY-ST-ZIP **DEARBORN MI 48126**

TITLE **P** ☐ Delete
NAME **HARRIS, ROBERT L JR**
STREET ADDRESS **3015 LK ALFRED RD**
CITY-ST-ZIP **WINTER HAVEN FL 33881**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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 of Block 12 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT L. HARRIS JR

1-11-02

863 2943571

Date

Daytime Phone #

CR2E034 (9/01)