

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90077 006 ***150.00

DOCUMENT # H92999
 1. Entity Name
VINCE WHIBBS IMPORTS, INC.

Principal Place of Business 3201 NAVY BLVD. PO DRAWER 12566 PENSACOLA FL 32573-9566	Mailing Address 3201 NAVY BLVD. PO DRAWER 12566 PENSACOLA FL 32573-2566
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-2615302	Applied For Not Applicable
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
MATTHEWS, EDESEL F., JR.
308 S JEFFERSON ST
PENSACOLA FL 32051

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, 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	C <input type="checkbox"/> Delete
NAME	WHIBBS, VINCE, SR.
STREET ADDRESS	3201 NAVY BLVD.
CITY-ST-ZIP	PENSACOLA FL
TITLE	D <input type="checkbox"/> Delete
NAME	WHIBBS, MARK T.
STREET ADDRESS	3201 NAVY BLVD.
CITY-ST-ZIP	PENSACOLA FL
TITLE	D <input type="checkbox"/> Delete
NAME	WHIBBS, GREGORY
STREET ADDRESS	3201 NAVY BLVD.
CITY-ST-ZIP	PENSACOLA FL
TITLE	D <input type="checkbox"/> Delete
NAME	WHIBBS, JOHN PAUL
STREET ADDRESS	3201 NAVY BLVD.
CITY-ST-ZIP	PENSACOLA FL
TITLE	D <input type="checkbox"/> Delete
NAME	BROWN, JACK
STREET ADDRESS	3401 NAVY BLVD.
CITY-ST-ZIP	PENSACOLA FL
TITLE	D <input type="checkbox"/> Delete
NAME	MATTHEWS, EDESEL F., JR.
STREET ADDRESS	308 S JEFFERSON ST
CITY-ST-ZIP	PENSACOLA FL

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 employees.

SIGNATURE: **04/25/2000** **850-433-7671**
SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)