2002 Uniform Business Report (UBR)

DOCU							
1. Entity Nan		41					
DEAVERS	S' AUTO CENTER, INC.		~		FILED		
Principal Place of Business 1609 S. MONROE STREET TALLAHASSEE FL 32301		Mailing Address 1609 S. MONROE STREET TALLAHASSEE FL 32301			2002 HAR 19 AM 9: DIVIJION CH CORPORA TALLAHASSEE, FLOI	TIONS	
				ļ	AT LAHASSEL, TEO		
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & Stat	te	City & State		•	4. FEI Number 59-2368852	 	oplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of Status Desired	\$8.75 Add Fee Require	
	6. Name and Address of Currer	nt Registered Agent		7	7. Name and Address of New Registered	Agent	
			Name				
HARTSFIELD, PAUL F., JR. 211 S. GADSDEN STREET			Street A	Street Address (P.O. Box Number is Not Acceptable)			
	SSEE FL 32301						
INGCRIN	/		City -		· FL	Zip Cod	е
8. The above	e named entity submits this statement	for the purpose of changing its	registered office o	r registered		7	
SIGNATURE							
SIGNATURE .	Signature, typed or printed name of registered age	nt and title if applicable. (NOT	E: Registered Agent signa	ture required wh	en reinstating) DATE		
	Signature, typed or printed name of registered age			 	en reinstating) DATE		
= 9. ~This corpo	Signature, typed or printed name of registered age oration: is: eligible to satisfy its intangib	FILE NOW	!!! FEE IS \$150	.00	en reinstating) DATE 10. Election Campaign Financing	\$5.0	
• 9. -This corpo	Signature, typed or printed name of registered age	FILE NOW After May 1, 20	!!! FEE IS \$150 02 Fee will be \$.00 550.00	10. Election Campaign Financing		0 May Be
• 9. -This corpo Tax filing i (See criter	Signature, typed or printed name of registered age oration is eligible to satisfy its intangible requirement and elects to do so, uria on back)	FILE NOW After May 1, 20 Make Check Payal	III FEE IS \$150 02 Fee will be \$ ble to Departmen	.00 550.00 nt of State	Election Campaign Financing Trust Fund Contribution.	ل Added	to Fees
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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: