

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 25, 2002 8:00 am**  
**Secretary of State**

01-25-2002 90004 015 \*\*\*150.00

0476947 AV

**DOCUMENT # J41250**

**1. Entity Name**  
**PERFORMANCE TOYOTA, INC.**

**Principal Place of Business**  
**P.O. BOX 9602**  
**4099 LAKE ALFRED RD.**  
**WINTER HAVEN FL 33883**

**Mailing Address**  
**P.O. BOX 9602**  
**4099 LAKE ALFRED RD.**  
**WINTER HAVEN FL 33883**



**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**City & State**

**City & State**

**4. FEI Number** **59-2735504**

☒ **Applied For**  
☐ **Not Applicable**

**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**

**MACALUSO, JOHN, T**  
**1750 CRUMP ROAD**  
**4099 LAKE ALFRED RD.**  
**WINTER HAVEN FL 33881**

**Name** **John T. Macaluso**  
**Street Address (P.O. Box Number is Not Acceptable)**  
**4099 Lake Alfred Road**  
**City** **Winter Haven** **FL** **Zip Code** **33881**

**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** **John Macaluso President** **1-10-02**  
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** ☐ **\$5.00 May Be Added to Fees**  
**Trust Fund Contribution.**

**11. OFFICERS AND DIRECTORS**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **PVT** ☐ **Delete**  
**NAME** **MACALUSO, JOHN, T**  
**STREET ADDRESS** **1750 CRUMP RD**  
**CITY-ST-ZIP** **WINTER HAVEN FL**

**TITLE** **John T. Macaluso** ☒ **Change** ☐ **Addition**  
**NAME** **John T. Macaluso**  
**STREET ADDRESS** **4099 Lake Alfred Road**  
**CITY-ST-ZIP** **Winter Haven, FL 33881**

**TITLE** **S** ☐ **Delete**  
**NAME** **CANTRELL, SHEILA**  
**STREET ADDRESS** **1203 THOMPSON CIRCLE NW**  
**CITY-ST-ZIP** **WINTER HAVEN FL 33881**

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

**TITLE** **VP** ☐ **Delete**  
**NAME** **ROBERT, RILEY E**  
**STREET ADDRESS** **423 QUAIL HOLLOW RD.**  
**CITY-ST-ZIP** **LAKELAND FL 33823**

**TITLE** **Robert E. Robert** ☒ **Change** ☐ **Addition**  
**NAME** **Robert E. Robert**  
**STREET ADDRESS** **423 Quail Hollow Road**  
**CITY-ST-ZIP** **Auburndale FL 33823**

**TITLE** ☐ **Delete**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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

**TITLE** ☐ **Delete**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ **Change** ☐ **Addition**  
**NAME**  
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**CITY-ST-ZIP**

**TITLE** ☐ **Delete**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**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 lines empowered.**

**SIGNATURE:**

**Sheila Cantrell**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Sheila Cantrell** **1-10-02** **863-956-1123**  
Date Daytime Phone #

CR2E034 (9/01)