

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 11, 2000 8:00 am**  
**Secretary of State**

05-11-2000 90201 001 \*\*\*317.50

**DOCUMENT # J63396**

1. Entity Name  
**WEST PALM AUTO MALL, INC.**

Principal Place of Business 551 S. MILITARY TRAIL WEST PALM BEACH FL 33415	Mailing Address 551 S. MILITARY TRAIL W. PALM BEACH FL 33416-4613 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip	4. FEI Number <b>65-0050202</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent <b>THOMPSON, DOUGLAS E. 4524 GUN CLUB ROAD SUITE 101 WEST PALM BEACH FL 33415</b>	7. Name and Address of New Registered Agent Name <b>MELISSA VAN OSTRAND</b> Street Address (P.O. Box Number is Not Acceptable) <b>551 S. MILITARY TRAIL</b> City <b>WEST PALM BEACH</b> FL Zip Code <b>33415</b>
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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: DATE: **4/28/00**

Signature, MELISSA VAN OSTRAND if applicable. (NOTE: Registered Agent signature required when reinstating)

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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>NELSON, ROBERT H</b> <b>375 PARK AVE, 22ND FL</b> <b>NEW YORK NY 10152</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>JAMES R. DAVIDSON</b> <b>915 COMMUNIPAW AVE.</b> <b>JERSEY CITY, NJ 07304</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <b>PROVENZO, NICHOLAS C</b> <b>551 SOUTH MILITARY TRAIL</b> <b>WEST PALM BEACH FL 33415</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>ROBERT H. KURNICK</b> <b>13400 OUTER DRIVE, WEST</b> <b>DETROIT, MI 48239-4001</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <b>SMITH, JR P N</b> <b>375 PARK AVE, 22ND FL</b> <b>NEW YORK NY 10152</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>THOMAS J. HESSERT, JR.</b> <b>585 ROUTE 440</b> <b>JERSEY CITY, NJ 07304</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>WINTERS, KARL H</b> <b>375 PARK AVE, 22ND FL</b> <b>NEW YORK NY 10152</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/T <b>JAMES R. DAVIDSON</b> <b>915 COMMUNIPAW AVE.</b> <b>JERSEY CITY, NJ 07304</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/AS <b>ROBERT H. KURNICK</b> <b>13400 OUTER DRIVE, WEST</b> <b>DETROIT, MI 48239-4001</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	svp <b>SAM X. DIFE0, JR.</b> <b>375 PARKAVE., 11TH FLOOR</b> <b>NEW YORK, NY 10152</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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 the like empowered.

SIGNATURE: DATE: **4/28/00** DAYTIME PHONE #: **561-683-7100**

Signature of Officer or Director

CR2E034 (9/99)

~~# J 63396~~  
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Publicly traded on the New York Stock Exchange

14107 ~~656304~~

A UnitedAuto Dealership  
551 South Military Trail  
West Palm Beach, FL 33415-3910  
Tel 561 683-7100  
Fax 561 684-6910  
www.westpalmautomall.com

4/28/00

ADDITIONAL OFFICERS, WEST PALM AUTO MALL, INC.

VP/S  
TAMBRA S. KING  
375 PARK AVE.  
NEW YORK, NY 10152

VP  
WILLIAM H. CAMASTRO  
551 S. MILITARY TRAIL  
WEST PALM BEACH, FL 33415

VP  
CAROL DYKE  
551 S. MILITARY TRAIL  
WEST PALM BEACH, FL 33415

AS  
KIMBERLY LUKICH  
551 S. MILITARY TRAIL  
WEST PALM BEACH, FL 33415

AS  
MELISSA VAN OSTRAND  
551 S. MILITARY TRAIL  
WEST PALM BEACH, FL 33415