

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2000 8:00 ar
Secretary of State

05-10-2000 90174 003 ***150.00

DOCUMENT # K74992

Entity Name

UNIVERSITY AUTO BROKERS, INC.

Principal Place of Business N. MAIN ST. GAINESVILLE FL 32609	Mailing Address 3432 N. MAIN ST. GAINESVILLE FL 32609-2348 US
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 59-2942828	Applied For <input type="checkbox"/> Not Applicable
Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent STEADHAM, JOHN M. 527 EAST UNIVERSITY AVE GAINESVILLE FL 32602		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<input type="checkbox"/> Corporation is eligible to satisfy its Intangible 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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
DP BEVILLE, ROBERT J. 3432 N. MAIN ST. GAINESVILLE FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CR2E034 (9/99)

I 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 stated 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 signed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DATE: **4-28-00** DAYTIME PHONE #: **352-321-2277**