

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K74992

FILED
Jul 08, 2004
Secretary of State

Entity Name: UNIVERSITY AUTO BROKERS, INC.

Current Principal Place of Business:

320 NE 33 AVE.
GAINESVILLE, FL 32609 US

New Principal Place of Business:

320 NE 33 AVE.
E
GAINESVILLE, FL 32609 US

Current Mailing Address:

320 NE 33 AVE.
GAINESVILLE, FL 32609 US

New Mailing Address:

320 NE 33 AVE.
E
GAINESVILLE, FL 32609 US

FEI Number: 59-2942828 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEADHAM, JOHN M.
527 EAST UNIVERSITY AVE
GAINESVILLE, FL 32602

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BEVILLE, ROBERT J.,
Address: 3432 N. MAIN ST.
City-St-Zip: GAINESVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BEVILLE, ROBERT J.,
Address: 320 N.E. 33 AVE, SUITE E
City-St-Zip: GAINESVILLE, FL 32609 AL

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT J BEVILLE

PRES

07/08/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date