

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 12, 2001 8:00 am
Secretary of State

04-12-2001 90665 001 *1,800.00

DOCUMENT # L82113

1. Entity Name

SUNCOAST AUTO BROKERS ENTERPRISES, INC.

Principal Place of Business

**5200 S. WASHINGTON AVENUE
TITUSVILLE FL 32780**

Mailing Address

**5200 S. WASHINGTON AVENUE
TITUSVILLE FL 32780**

2. Principal Place of Business

175 Crispin St.

Suite, Apt. #, etc.

3. Mailing Address

175 Crispin St.

Suite, Apt. #, etc.

City & State

Merritt Island, FL

City & State

Merritt Island, FL

Zip

32952

Country

USA

Zip

32952

Country

USA

4. FEI Number

59-3017262

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SMITH, GARY R
5200 S. WASHINGTON AVENUE
TITUSVILLE FL 32780**

7. Name and Address of New Registered Agent

Name

Gary R. Smith

Street Address (P.O. Box Number is Not Acceptable)

175 Crispin St

City

Merritt Island

FL

Zip Code

32952

8. The above named entity submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and fee 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, 2001 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

TITLE **PD** ☐ Delete
NAME **SMITH, GARY R**
STREET ADDRESS **5200 S. WASHINGTON AVENUE**
CITY-ST-ZIP **TITUSVILLE FL 32780**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
NAME **Gary R. Smith**
STREET ADDRESS **175 Crispin St.**
CITY-ST-ZIP **Merritt Island, FL 32952**

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

0055606