

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 20, 2001 8:00 am**  
**Secretary of State**

07-20-2001 90006 017 \*\*\*150.00

**DOCUMENT # M93428**

1. Entity Name  
**WORKMAN'S KWIK-FIX, INC.**

Principal Place of Business  
**4635 EMERSON ST**  
**C/O DONALD E. WORKMAN**  
**JACKSONVILLE FL 32207**

Mailing Address  
**4635 EMERSON ST**  
**C/O DONALD E. WORKMAN**  
**JACKSONVILLE FL 32207**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2929198**

Applied For  
 Not Applicable

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

**WORKMAN, DONALD E.**  
**4635 EMERSON ST**  
**JACKSONVILLE FL 32207**

Name

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

City

**FL**

Zip Code

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

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 \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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 **PD** ☐ Delete  
 NAME **WORKMAN, DONALD E**  
 STREET ADDRESS **4635 EMERSON ST**  
 CITY-ST-ZIP **JACKSONVILLE FL 32207**

TITLE ☒ **Dennis Heying** ☐ Change ☐ Addition  
 NAME **Dennis Heying**  
 STREET ADDRESS **227 Jackson Rd**  
 CITY-ST-ZIP **Jax, FL 32226**

TITLE **V** ☐ Delete  
 NAME **WORKMAN, DAVID E SR.**  
 STREET ADDRESS **1402 GLENDALE DR.**  
 CITY-ST-ZIP **JACKSONVILLE FL**

TITLE ☒ **Sam McAffee** ☐ Change ☐ Addition  
 NAME **Sam McAffee**  
 STREET ADDRESS **248 Westly Rd**  
 CITY-ST-ZIP **Green Cove Springs, FL 32043**

TITLE **T** ☐ Delete  
 NAME **WORKMAN, MELISSA-T.**  
 STREET ADDRESS **1402 GLENDALE DR**  
 CITY-ST-ZIP **JACKSONVILLE FL**

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

TITLE **V** ☐ Delete  
 NAME **WILLIAMSON, MIKE**  
 STREET ADDRESS **2891 DICKINSON RD**  
 CITY-ST-ZIP **JACKSONVILLE FL**

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

TITLE **V** ☐ Delete  
 NAME **RAY, RONALD C**  
 STREET ADDRESS **2173 CORTEZ ROD**  
 CITY-ST-ZIP **JACKSONVILLE FL**

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

TITLE ☒ ☐ Delete  
 NAME **Jon S. Bass**  
 STREET ADDRESS **4334 Turner Ave**  
 CITY-ST-ZIP **Jax, FL 32207**

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 like empowered.

SIGNATURE: **Donald E. Workman**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/17/01**

Date

**(904)**

**390-4118**

Daytime Phone #

CR2E034 (5/01)

WORKMAN'S



4635 Emerson St. • Jacksonville, Florida 32207  
(904) 398-4118

July 17, 2001

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To whom it may concern;

I received a notice in the mail showing that I had not sent in my 2001 Uniform Business Report and I was required to pay a \$400.00 penalty for filing late. I researched my records and found that I had written a check #14905 on 03/13/2001. I called your offices and talk to a lady that said I needed to check to see if my check had cleared and I have found that it has not. Please take this as notice that I have canceled the original check and I am issuing you a new check. If you need anything further, please contact me at anytime.

Sincerely,

Donald E. Workman  
President