

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N51259

1. Entity Name

GREATER TAMPA BAY AUTOMOBILE DEALERS ASSOCIATION

Principal Place of Business

4907 LYFORD CAY RD
TAMPA FL 33629
US

Mailing Address

4907 LYFORD CAY RD
TAMPA FL 33629-4828
US

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

59-3148462

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

ADAMS, JAMES D
% LAW OFFICE OF JAMES D ADAMS
7300 W CAMINO REAL #224
BOCA RATON FL 33433-9984

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

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D QUINLAN, JERRY 15005 U. S. HWY 19 N CLEARWATER FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKS RONALD 10505 N FLORIDA AVE TAMPA FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BELVISO, MARK 2339 GULF TO BAY BLVD CLEARWATER F	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOUGLAS, WILLIAM 2500 34TH ST N ST. PETERSBURG FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED WILSON III, GEORGE O 4907 LYFORD CAY ROAD TAMPA FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEO, AL 9400 US HWY 19 N PINELLAS PARK FL	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Bob Smith 27365 US Hwy 19 N. Clearwater FL 33761	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3/T EDWARD Gomez, JR. 9151 ADAMO DRIVE TAMPA FL 33619	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RON Mueller 13525 US Hwy 19 N. Clearwater FL 33764	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Walter Thatcher 5815 N. Dale Mabry Hwy. TAMPA FL 33614	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ralph Ghioto, III 4400 N. Dale Mabry Hwy. TAMPA FL 33614	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George O. Wilson III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 21, 2000

813-286-0245

Date

Daytime Phone #

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90389 004 ****61.25



DO NOT WRITE IN THIS SPACE

N51259

648787

2000 Uniform Business Report (UBR)

Attachment – Page 2

Document #N51259

Greater Tampa Bay Automobile Dealers Association, Inc.

11.

Title

D

[X] Addition

Name

Bert Smith III

Street Address

3800 24th Street N.

City-St-Zip

St. Petersburg FL 33714