

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000000902

1. Entity Name

VOLUSIA MOTORCYCLE TRAINING, INC.

FILED
Feb 24, 2000 8:00 am
Secretary of State

02-24-2000 90053 044 ****61.25

Principal Place of Business

6168 OLYMPIC COURT
PORT ORANGE FL 32127

Mailing Address

6168 OLYMPIC COURT
PORT ORANGE FL 32127-5344

2. Principal Place of Business

4857 SPRUCE CREEK ROAD

3. Mailing Address

4857 SPRUCE CREEK ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PORT ORANGE, FL

City & State

PORT ORANGE, FL

4. FEI Number

59-3230301

Applied For

Not Applicable

Zip

32127

Country

USA

Zip

32127

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KEMP, DENNIS
6168 OLYMPIC COURT
PORT ORANGE FL 32127

7. Name and Address of New Registered Agent

Name

KEMP, DENNIS

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

4857 SPRUCE CREEK ROAD

City

PORT ORANGE

FL

Zip Code

32127

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

TITLE PD ☐ Delete

NAME KEMP, DENNIS
STREET ADDRESS 6168 OLYMPIC COURT
CITY-ST-ZIP PORT ORANGE FL 32127

TITLE STD ☐ Delete

NAME KEMP, GLADYS
STREET ADDRESS 6168 OLYMPIC COURT
CITY-ST-ZIP PORT ORANGE FL 32127

TITLE VD ☐ Delete

NAME WANDS, DEBORAH
STREET ADDRESS 2505 AUBURN
CITY-ST-ZIP NEW SMYRNA BEACH FL 32168

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS 4857 SPRUCE CREEK ROAD
CITY-ST-ZIP PORT ORANGE, FL 32127

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS 4857 SPRUCE CREEK ROAD
CITY-ST-ZIP PORT ORANGE, FL 32127

TITLE ☐ Change ☐ Addition

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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: SIGNATURE REQUIRED DENNIS KEMP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-11-00

Date

(904) 756-4733

Daytime Phone #

CR2E037 (9/99)