

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005473

1. Entity Name

SOUTHEAST DODGE TRUCK DEALERS ADVERTISING ASSOCI

FILED
Mar 13, 2000 8:00 am
Secretary of State

03-13-2000 90038 028 ****61.25

Principal Place of Business

Mailing Address

80000 S. ORANGE BL. TRAIL
ORLANDO FL 32809

C/O BEHAR. REID. GREEN CPAS INC.
4 BRADLEY PARK CT
COLUMBUS GA 31904-3638

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3473409

Applied For

Not Applicable

Zip

Country

Zip

Country

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

WILSON, BOB
11945 N FLORIDA AVE
ORLANDO FL 33612

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 D ☐ Delete
NAME COUGHLIN, MICHAEL
STREET ADDRESS 1000 CHRYSLER DRIVE
CITY-ST-ZIP AUBURN HILLS MI 48326

TITLE D ☐ Change ☒ Addition
NAME McCulloch, Stan
STREET ADDRESS 3831 Hwy 31
CITY-ST-ZIP Decatur, AL 35602

TITLE D ☐ Delete
NAME MAYBERRY, BOB
STREET ADDRESS 3220 HW 74 W
CITY-ST-ZIP MONROEA NC 28110

TITLE D ☐ Change ☒ Addition
NAME Locklear, Steve
STREET ADDRESS 3200 16th AVE.
CITY-ST-ZIP Tuscaloosa, AL 35401

TITLE D ☐ Delete
NAME EGOLF, JEFF
STREET ADDRESS 401 DUNCAN HILL RD
CITY-ST-ZIP HENDERSONVILLE NC 28739

TITLE D ☐ Change ☒ Addition
NAME Brilliant, Fred
STREET ADDRESS 6446 Tara Blvd.
CITY-ST-ZIP Jonesboro, GA 30236

TITLE D ☐ Delete
NAME WILSON, BOB
STREET ADDRESS 11945 N. FLORIDA AVE.
CITY-ST-ZIP TAMPA FL 33612

TITLE D ☐ Change ☒ Addition
NAME Davis, Denny
STREET ADDRESS 3850 Cumberland Circle, Ste 825
CITY-ST-ZIP Atlanta, GA 30339

TITLE D ☐ Delete
NAME AICHER, KEVIN
STREET ADDRESS 5455 S. UNIVERSITY DRIVE
CITY-ST-ZIP DAVIE FL 33328

TITLE D ☐ Change ☒ Addition
NAME Saddler, Sandy
STREET ADDRESS 4944 Parkway Plaza Blvd #3, Ste 470
CITY-ST-ZIP Charlotte, NC 28217

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Wheeler, Judy
STREET ADDRESS 8000 S. Orange Blossom Trail
CITY-ST-ZIP Orlando, FL 32809

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 3/17/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)