

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000006641

1. Entity Name

PROFESSIONAL VEHICLE INDUSTRY ASSOCIATION, INC.



**FILED**  
**Jun 20, 2000 8:00 am**  
**Secretary of State**

06-20-2000 90015 042 \*\*\*\*61.25

Principal Place of Business

Mailing Address

4500 140TH AVE N  
SUITE 101  
CLEARWATER FL 33762  
US

4500 140TH AVE N  
SUITE 101  
CLEARWATER FL 33762-3848  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT-APPLICABLE-

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

PARMELEE, JD  
550 NORTH REO ST., STE. 300  
TAMPA FL 33609

Name

Audrey Parmelee

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

4500 140th Ave. No. Suite 101

City

Clearwater

FL

Zip Code

33762

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

*Audrey Parmelee*

Audrey Parmelee, DS

June 14, 2000

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 DP ☐ Delete  
NAME PARMELEE, JD  
STREET ADDRESS 4584 FOX LAKE CT  
CITY-ST-ZIP CLEARWATER FL 33761

TITLE ☒ Change ☐ Addition  
NAME   
STREET ADDRESS   
CITY-ST-ZIP Zip 33762

TITLE DT ☐ Delete  
NAME PARMELEE, AUDREY J  
STREET ADDRESS 4584 FOX LAKE CT  
CITY-ST-ZIP CLEARWATER FL 33761

TITLE DS ☒ Change ☐ Addition  
NAME   
STREET ADDRESS   
CITY-ST-ZIP Zip 33762

TITLE DS ☐ Delete  
NAME BROWN, JAMES H  
STREET ADDRESS 3150 65TH ST. NO.  
CITY-ST-ZIP ST. PETERSBURG FL 33701

TITLE D ☒ Change ☐ Addition  
NAME   
STREET ADDRESS   
CITY-ST-ZIP Zip 33710

TITLE ☐ Delete  
NAME   
STREET ADDRESS   
CITY-ST-ZIP

TITLE D/T ☐ Change ☒ Addition  
NAME Jan D Heffington  
STREET ADDRESS 233 Williams St., Aurora, IL 60506  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME   
STREET ADDRESS   
CITY-ST-ZIP

TITLE D/V ☐ Change ☒ Addition  
NAME Michelle A. Williams  
STREET ADDRESS 1032 Pine Ridge Cr., Brandon, FL  
CITY-ST-ZIP 33511

TITLE ☐ Delete  
NAME   
STREET ADDRESS   
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:

*Audrey Parmelee*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 14, 2000

Date

727-299-0707

Daytime Phone #

CR2t 037 (9/99)