

2000 UNIFORM BUSINESS REPORT (UBR)

0006872

DOCUMENT # N98000001770

1. Entity Name

AUTONATION PARK ASSOCIATION, INC.

FILED

00 JUL 13 PM 1:35

Principal Place of Business

110 SE 6TH STREET, 20TH FLOOR
FORT LAUDERDALE FL 33301

Mailing Address

110 SE 6TH STREET, 20TH FLOOR
FORT LAUDERDALE FL 33301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten Signature]



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65908291 APPLIED FOR

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

DWORS, ROBERT F
110 SE 6TH STREET, 20TH FLOOR
FORT LAUDERDALE FL 33301

Name
CT CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND ROAD

City
PLANTATION

FL

Zip Code
33324

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

PETER F. SOUZA
ASSISTANT SECRETARY

7/12/00

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

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 PD ☐ Delete
NAME DWORS, ROBERT F
STREET ADDRESS 110 SE 6TH STREET, 20TH FLOOR
CITY-ST-ZIP FORT LAUDERDALE FL 33301

TITLE ☐ Change ☐ Addition
NAME 500003351565--6
STREET ADDRESS -08/09/00--01110--006
CITY-ST-ZIP *****61.25 *****61.25

TITLE SD ☐ Delete
NAME STRAUTMAN, JOHN A
STREET ADDRESS 110 SE 6TH STREET, 20TH FLOOR
CITY-ST-ZIP FORT LAUDERDALE FL 33301

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

TITLE TD ☐ Delete
NAME TURPEL, NEWELL
STREET ADDRESS 110 SE 6TH STREET, 20TH FLOOR
CITY-ST-ZIP FORT LAUDERDALE FL 33301

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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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:

NEWELL TURPEL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/7/2000 954 769 7133

CR2E037 (5/00)