

**2001 UNIFORM BUSINESS REPORT (UBR)**

4/2

**FILED**  
**May 17, 2001 8:00 am**  
**Secretary of State**

04-02-2001 90061 023 \*\*\*\*61.25

**DOCUMENT # N98000002141**  
 1. Entity Name  
**CORVETTE CRUISERS OF GREATER DAYTONA BEACH, INC.**

Principal Place of Business 719 KATHERINE ST. SOUTH DAYTONA FL 32119	Mailing Address P.O. BOX 1956 NEW SMYRNA BEACH FL 32170
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2. Principal Place of Business 5465 Landis Av Suite, Apt. #, etc.	3. Mailing Address PO Box 1956 Suite, Apt. #, etc.
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City & State Port Orange, Fl	City & State New Smyrna Beach, Fl	4. FEI Number 59-3529976	Applied For <input type="checkbox"/> Not Applicable
Zip 32127	Country USA	Zip 32179	Country USA



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent:  
**QUINN, JAMES**  
 719 KATHERINE ST.  
 SOUTH DAYTONA FL 32119

7. Name and Address of New Registered Agent  
 Name  
**Donna Ericson**  
 Street Address (P.O. Box Number is Not Acceptable)  
**5465 Landis Ave**  
 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 *Donna Ericson* **DONNA ERICSON-TREASURER** **3/21/01**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW: FEE IS \$61.25</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Department of State</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LAGES, GEORGE 104 SAND DUNES DR ORMOND BEACH FL 32176 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV LAGES, GEORGE 104 SAND DUNES DR. ORMOND BEACH, FL. 32176 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ERICSON, DONNA 5465 LANDIS AVE PORT ORANGE FL 32127 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT QUINN, JAMES 719 KATHERINE ST. SOUTH DAYTONA FL 32119 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FISHER, ROBERT 147 GREEN HERON CT DAYTONA BEACH FL 32119 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D President Virginia Quinn 719 Katherine St So Daytona, Fl 32119 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Vice President Arthur Armstrong 39 Koala Bear Path Ormond Beach, Fl 32174 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Secretary Leslie Armstrong 39 Koala Bear Path Ormond Beach, Fl 32174 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input 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: *Donna Ericson* **DONNA ERICSON** **3/21/01** **904-226-7824**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)