

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Apr 05, 2001 8:00 am**  
**Secretary of State**

04-05-2001 90016 002 \*\*\*150.00

**DOCUMENT # P00000010848**

1. Entity Name

**AUTOMOTIVE CONNECTION ENTERPRISES, INC.**

Principal Place of Business

**5422 TIMBER CHASE COURT  
ORLANDO FL 32811**

Mailing Address

**5422 TIMBER CHASE COURT  
ORLANDO FL 32811**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0980123**

Applied For

Not Applicable

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

**EADY, FAYBELLE F  
4024 WATCH HILL ROAD  
ORLANDO FL 32808**

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐  
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME SULLIVAN, TEVITT SR.  
STREET ADDRESS 5422 TIMBER CHASE COURT  
CITY-ST-ZIP ORLANDO FL 32811

TITLE PTD ☐ Change ☒ Addition  
NAME Sullivan, Tevitt Sr.  
STREET ADDRESS 5422 Timber Chase Court  
CITY-ST-ZIP Orlando, FL 32811

TITLE SD ☐ Delete  
NAME SULLIVAN, CYNTHIA E SR.  
STREET ADDRESS 5422 TIMBER CHASE COURT  
CITY-ST-ZIP ORLANDO FL 32811

TITLE S.D. ☐ Change ☒ Addition  
NAME Sullivan, Cynthia E  
STREET ADDRESS 5422 Timber Chase Court  
CITY-ST-ZIP Orlando, FL 32811

TITLE VD ☒ Delete  
NAME NIEVES, THOMAS  
STREET ADDRESS 2212 LEEWOOD BOULEVARD  
CITY-ST-ZIP MELBOURNE FL 32935

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

TITLE TD ☒ Delete  
NAME NIEVES, TERRI D  
STREET ADDRESS 2212 LEEWOOD BOULEVARD  
CITY-ST-ZIP MELBOURNE FL 32935

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☒ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Tevitt Sullivan Sr.**

**01 April 2001**

Daytime Phone #

**407 2988701**

CR2E034 (10/00)