

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000020070

1. Entity Name

NEW WAY AUTO BROKERS, INC.

Principal Place of Business

Mailing Address

~~440 S HARBOR CITY BLVD~~  
~~MELBOURNE FL 32901~~

~~440 S HARBOR CITY BLVD~~  
~~MELBOURNE FL 32901~~

2. Principal Place of Business

454 S HARBOR CITY BLVD

Suite, Apt. #, etc.

3. Mailing Address

454 S. Harbor City Blvd.

Suite, Apt. #, etc.

City & State

MELBOURNE, FL

City & State

Melbourne, FL

Zip

32901

Country

US

Zip

32901

Country

US

4. FEI Number

59-3631403

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

FUSILLO, STEVEN

440 S HARBOR CITY BLVD  
MELBOURNE FL 32901

7. Name and Address of New Registered Agent

Name

RAX CO. c/o BARBARA C. JOHNSTON

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

50 NORTH LAURA STREET

Suite 3300

City

Jacksonville

FL

Zip Code

32202

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

*Barbara C. Johnston*

Vice President

4-6-01

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

TITLE D ☒ Delete  
NAME FUSILLO, STEVEN  
STREET ADDRESS 440 S HARBOR CITY BLVD  
CITY-ST-ZIP MELBOURNE FL 32901

TITLE D ☐ Delete  
NAME FUSILLO, PAL JR  
STREET ADDRESS 440 S HARBOR CITY BLVD  
CITY-ST-ZIP MELBOURNE FL 32901

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SECRETARY ☒ Change ☐ Addition  
NAME CAROLYN SUE HUNTER  
STREET ADDRESS 440 S HARBOR CITY BLVD  
CITY-ST-ZIP MELBOURNE, FL 32901

TITLE PRESIDENT ☒ Change ☐ Addition  
NAME FUSILLO, PAUL JR.  
STREET ADDRESS 440 SOUTH HARBOR CITY BLVD  
CITY-ST-ZIP MELBOURNE, FL 32901

TITLE DIRECTOR ☐ Change ☒ Addition  
NAME FUSILLO, PAUL SR.  
STREET ADDRESS 440 SOUTH HARBOR CITY BLVD  
CITY-ST-ZIP MELBOURNE, FL 32901

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

TITLE ☐ Change ☐ Addition  
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)(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 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

PAUL FUSILLO, SR, DIRECTOR

321-723-2941

FILED  
Apr 18, 2001 8:00 am  
Secretary of State

04-18-2001 90044 003 \*\*\*150.00

00001038



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)