

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90073 029 ***150.00

DOCUMENT # P00000022173

1. Entity Name

VEHICLE FINANCE COMPANY, INC.

Principal Place of Business

1600 SUNSHINE DRIVE
CLEARWATER FL 33765

Mailing Address

1600 SUNSHINE DRIVE
CLEARWATER FL 33765

2. Principal Place of Business

220 E. Madison Street

Suite, Apt. #, etc.
Suite 1221

City & State

Tampa, FL

Zip
33602

Country

U.S.A.

3. Mailing Address

3438 Skysail Place

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33607

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3647894

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, LEONARD H
37837 MERIDIAN AVENUE
SUITE 314
DADE CITY FL 33525

7. Name and Address of New Registered Agent

Name

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

City

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

TITLE ☐ Delete
NAME D
STREET ADDRESS BLACKBURN, WILLIAM B
CITY-ST-ZIP 3438 SKYSAIL PLACE
TAMPA FL 33607

TITLE ☐ Delete
NAME D
STREET ADDRESS BLACKBURN, W. MATTHEW
CITY-ST-ZIP 1600 SUNSHINE DRIVE
CLEARWATER FL 33765

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 ☒ Change ☐ Addition
NAME D
STREET ADDRESS Blackburn, W. Matthew
CITY-ST-ZIP 607 S. Westland Ave. #11
Tampa, FL 33606

TITLE ☐ Change ☒ Addition
NAME S
STREET ADDRESS Michael Uliano
CITY-ST-ZIP 220 E. Madison St. Suite 1221
Tampa, FL 33602

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

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:

Michael J. Uliano
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/01
Date

813/784-007
Daytime Phone #

CR2E034 (10/00)