

2001 UNIFORM BUSINESS REPORT (UBR)

4/2

FILED
Jun 15, 2001 8:00 am
Secretary of State

04-26-2001 90236 049 ***150.00

DOCUMENT # P00000027377

1. Entity Name

MORANDE RENT A CAR, INC.

(64)

Principal Place of Business

1472 AIRPORT RD. S.
 NAPLES FL 34104

Mailing Address

1472 AIRPORT RD. S.
 NAPLES FL 34104

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

59-3633923

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

HOOLEY, JOHN F.
4532 TAMiami TR. E., STE. 401
NAPLES FL 34112

7. Name and Address of New Registered Agent

Name
Donna Lewis
 Street Address (P.O. Box Number is Not Acceptable)
850 Park Shore Dr - 3rd Floor
Trancon Centre
 City
Naples Zip Code
34103

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]

Signature, typed or printed name of registered agent, and (if applicable, (NOTE: If registered agent, signature is required when it is being filed)

5/10/2001

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

Write 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	P	☐ Delete
NAME	MORANDE, JAMES A JR	
STREET ADDRESS	1472 AIRPORT RD. S.	
CITY-STATE-ZIP	NAPLES FL 34104	
TITLE	V	☐ Delete
NAME	MORANDE, MICHAEL J	
STREET ADDRESS	1472 AIRPORT RD. S.	
CITY-STATE-ZIP	NAPLES FL 34104	
TITLE	S	☒ Delete
NAME	YOUNG, IVAN	
STREET ADDRESS	1472 AIRPORT RD. S.	
CITY-STATE-ZIP	NAPLES FL 34104	
TITLE	T	☒ Delete
NAME	MORANDE, DONNA	
STREET ADDRESS	1472 AIRPORT RD. S.	
CITY-STATE-ZIP	NAPLES FL 34104	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	5205 Old Gallows Way	
CITY-STATE-ZIP	Naples, FL 34105	
TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	9030 Harvest Wood Ct.	
CITY-STATE-ZIP	Esteros, FL 33928	
TITLE	S	☐ Change ☒ Addition
NAME	Kerncy L. Pinkston	
STREET ADDRESS	735 102nd Ave	
CITY-STATE-ZIP	Naples, FL 34108	
TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	5205 Old Gallows Way	
CITY-STATE-ZIP	Naples, FL 34105	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-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 employees.

SIGNATURE

[Signature] James A. Morande, Jr.

DATE

4-17-01 (94) 732-8909

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2034 (10/00)