

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90016 018 ***150.00

0004605

DOCUMENT # P00000058638

1. Entity Name
LANDSTAR ASSOCIATES, INC.

Principal Place of Business Mailing Address
~~125 S PALMETTO AVE~~ **440B Fentress Blvd** ~~125 S PALMETTO AVE~~ **440B Fentress Blvd**
DAYTONA BEACH FL 32114 **DAYTONA BEACH FL 32114**

2. Principal Place of Business 3. Mailing Address
440 B Fentress Blvd. **440B Fentress Blvd.**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Daytona Beach, FL **Daytona Bch, FL**
 Zip Country Zip Country
32114 **Volusia** **32114** **Volusia**

4. FEI Number Applied For
59-3653144 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVE
DAYTONA BEACH FL 32115-2491

7. Name and Address of New Registered Agent
 Name **CAROL Haskell**
 Street Address (P.O. Box Number is Not Acceptable)
440B Fentress Blvd.
 City **Daytona Beach** **FL** Zip Code **32114**

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 **CAROL HASKELL** *Carol Haskell* DATE **4-20-01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
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	<input type="checkbox"/> Delete
NAME	D UPCHURCH, PAUL
STREET ADDRESS	125 S PALMETTO AVE
CITY-ST-ZIP	DAYTONA BEACH FL 32114
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S/T/D PAUL N. Upchurch
STREET ADDRESS	440 B Fentress Blvd.
CITY-ST-ZIP	Daytona Beach, FL 32114
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	P/D ROBERT A. Eales
STREET ADDRESS	440 B Fentress Blvd.
CITY-ST-ZIP	Daytona Beach, FL 32114
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VP/D TERRY HARPER
STREET ADDRESS	440 B Fentress Blvd
CITY-ST-ZIP	Daytona Beach, FL 32114
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 employed.

SIGNATURE: *Paul N. Upchurch* **PAUL N. Upchurch** DATE **4-20-01** DAYTIME PHONE # **386-323-9596**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)



DO NOT WRITE IN THIS SPACE