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FILED
Jun 08, 2001 8:00 am
Secretary of State

05-15-2001 90163 041 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000063780

Entity Name

WEST ORANGE AUTOMOTIVE, INC.

Principal Place of Business

1029 CARTER RD.
WINTER GARDEN FL 34787

Mailing Address

1029 CARTER RD.
WINTER GARDEN FL 34787

Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

593672143

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRITTON, CATHERINE M
1029 CARTER RD.
WINTER GARDEN FL 34787

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

FILE NOW!!! FEI 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	BRITTON, RANDY D	
STREET ADDRESS	6524 LAGOON AVE	
CITY-STATE-ZIP	WINDERMERE FL 34788	
TITLE	D	☐ Delete
NAME	BRITTON, CATHERINE M	
STREET ADDRESS	6524 LAGOON AVE	
CITY-STATE-ZIP	WINDERMERE FL 34788	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
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	1132 ROCKPORT ST.	
CITY-STATE-ZIP	ORLANDO, FL 32836	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS	1132 ROCKPORT ST.	
CITY-STATE-ZIP	ORLANDO, FL 32836	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

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.

Randy Britton 2/12/01 Cathi Britton