

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-23-2002 90342 014 ***550.00

DOCUMENT # P00000068984

1. Entity Name

BOB BROWN AUTOMOTIVE & FLEET SERVICE, INC.

Principal Place of Business

**2410-A 10TH ST. CT. E.
ELLENTON FL 34222**

Mailing Address

**2410-A 10TH ST. CT. E.
ELLENTON FL 34222**

2. Principal Place of Business

2418 10TH ST CT E

3. Mailing Address

2418 10TH ST CT E

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ELLENTON FL

City & State

ELLENTON FL

4. FEI Number

65-1031855

Applied For

Not Applicable

Zip

34222

Country

MANATEE

Zip

34222

Country

MANATEE

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BROWN, BOB

**2410-A 10TH ST. CT. E.
ELLENTON FL 34222**

7. Name and Address of New Registered Agent

Name

GARY BLANKENSHIP

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

2418 10TH ST CT E

City

ELLENTON

FL

Zip Code

34222

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Gary Blankenship
Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7-11-02

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **BROWN, BOB**
STREET ADDRESS **2410-A 10TH ST. CT. E.**
CITY-ST-ZIP **ELLENTON FL 34222**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **GARY BLANKENSHIP**
STREET ADDRESS **2418 10TH ST CT E**
CITY-ST-ZIP **ELLENTON FL 34222**

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

TITLE ☐ Change ☐ Addition
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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

Gary Blankenship
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-11-02 941-719-5517
Date Daytime Phone #

CR2E034 (4/02)