

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
 05-13-2002 90186 044 ***150.00

0012097
 AV

DOCUMENT # P00000099334

1. Entity Name
ADAPTED DRIVING INC.

Principal Place of Business
PO BOX 6223
DAYTONA BEACH FL 32122

Mailing Address
305 RIVERSIDE DR.
APT 226
HOLLY HILL FL 32117

2. Principal Place of Business
130 Cedar St
 Suite, Apt. #, etc.

3. Mailing Address
130 Cedar Street
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Daytona Bch FL
 Zip
32117
 Country
Volusia

City & State
DAYTONA BEACH, FL
 Zip
32114
 Country
USA

4. FEI Number
59-3681219

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

BOUSQUET, HARRY
305 RIVERSIDE DR., #226
HOLLY HILL FL 32117

7. Name and Address of New Registered Agent

Name
BOUSQUET, HARRY
 Street Address (P.O. Box Number is Not Acceptable)
130 CEDAR STREET
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

(NOTE: Registered Agent signature required when reinstating)

DATE
4-18-02

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 \$150.00
After May 1, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP | D BOUSQUET, HARRY 305 RIVERSIDE DR., #226 HOLLY HILL FL 32117 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BAKER, DEIRDRE 305 RIVERSIDE DRIVE, #226 HOLLY HILL FL 32117 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BOUSQUET, HARRY 130 Cedar Street DAYTONA BEACH, FL 32114 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BAKER, DEIRDRE 130 CEDAR STREET DAYTONA BEACH, FL 32114 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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:

DATE
4/18/02

386
 852 5828
 Daytime Phone #

CR2E034 (9/01)