

FILED
Jul 10, 2002 8:00 am
Secretary of State

07-10-2002 90191 028 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000003854

1. Entity Name

Concourse Autos, Incorporated

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6000 S. Tamiami Trail

3. Mailing Address

6000 S. Tamiami Trail

Suite, Apt. #, etc.

Suite, Apt. #, etc.

B0127372

DO NOT WRITE IN THIS SPACE

City & State
Sarasota, FL

City & State
Sarasota, FL

4. FEI Number
52-2287765

Applied For
Not Applicable

Zip
34231

Country
Sarasota

Zip
34231

Country
Sarasota

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
David Macrae

Street Address (P.O. Box Number is Not Acceptable)
1703 Bayshore Road

City
Nokomis

FL

Zip Code
34275

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
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	PTD David Macrae 1703 Bayshore Road Nokomis, FL 34275	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD Susan Macrae 1703 Bayshore Road Nokomis, FL 34275	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other fees empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-1-02

Date

741-586-1192

Daytime Phone #

CR2E034B (12/01)

Attachment
Document #
PD1000003854

July 1, 2002

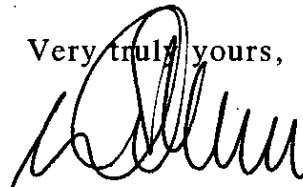
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Concourse Autos, Incorporated
Document # P01000003854

Dear Sir/Madam:

The undersigned, as President of the above corporation, hereby requests that the late charge of \$400 not be imposed in connection with the enclosed Uniform Business Report for the reason that the corporation did not receive the Uniform Business Report.

Very truly yours,

A handwritten signature in black ink, appearing to read 'David Macrae', written over the closing 'yours,'.

David Macrae
President