

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 15, 2002 8:00 am
Secretary of State

04-15-2002 90017 014 ***158.75

0450301 AV

DOCUMENT # P01000086871

1. Entity Name

VALUED AUTO WHOLESALE, INC.

Principal Place of Business

**5690 28TH STREET NORTH
ST PETERSBURG FL 33714**

Mailing Address

**5690 28TH STREET NORTH
ST PETERSBURG FL 33714**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

USA

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

USA

4. FEI Number

59-3738552

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

CLARK, GARNET C

**13007 BELCHER RD 782 43rd Ave North
LARGO FL 33703 St. Petersburg, FL 33703**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 **Garnet C Clark**

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

(NOTE: Registered Agent signature required when reinstating)

4-5-02

DATE

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 **P** ☐ Delete
NAME **CLARK, GARNET C**
STREET ADDRESS **13007 BELCHER RD 782 43rd Avenue North**
CITY-ST-ZIP **LARGO FL 33703 St. Petersburg, FL 33703**

TITLE **P** ☐ Delete
NAME **CLARK, THERESA A**
STREET ADDRESS **13007 BELCHER RD 782 43rd Ave. North**
CITY-ST-ZIP **LARGO FL 33703 St. Petersburg, FL 33703**

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

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

TITLE ☐ Change ☐ Addition
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NAME
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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:

Garnet C Clark

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-02

Date

727 804 8078

Daytime Phone #

CR2E034 (9/01)