

PD20000021655

(Requestor's Name)

Wilson's Auto Finance  
& Sales, Inc.  
2730 N. Orange Blossom Trail  
Orlando Florida 32804

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

3/26/04  
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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Wilson's Auto Finance And Sales, Inc
2. The mailing address of the corporation: 2730 N. Orange Blossom Trail Orlando, Fl. 32804
3. Date of incorporation/qualification: \_\_\_\_\_ Document number: \_\_\_\_\_
4. The name and address of the current registered agent and registered office:

David L. Leutz  
4625 Sloewood Drive  
Mount Dora, Fl. 32757

5. The name and address of the new registered agent (if changed) and /or registered office (if changed):  
(P.O. Box NOT Acceptable)

Angela Wilson  
909 N. John Street  
Orlando, Fl 32808

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The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Angela Wilson

(Signature of an officer, chairman or vice chairman of the board)

3-18-04  
(Date)

Angela Wilson Vice President  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Angela Wilson  
(Signature of Registered Agent)

3-18-04  
(Date)

If signing on behalf of an entity:

Angela Wilson  
(Typed or Printed Name)

(Capacity)

\* \* \* FILING FEE: \$35.00 \* \* \*