

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 05, 2005 8:00 am**  
**Secretary of State**

04-05-2005 90052 030 \*\*\*300.00

DOCUMENT # **PD2000098830**

1. Entity Name

**First Dealer Resource Inc**



**DO NOT WRITE IN THIS SPACE**

**40047321**

2. Principal Place of Business

**1515 Ridge Wood Ave**  
Suite, Apt. #, etc. **A**

3. Mailing Address

**1515 Ridge Wood Ave**  
Suite, Apt. #, etc. **A**

DO NOT WRITE IN THIS SPACE

City & State

**HH FL**

City & State

**HH FL**

4. FEE Number

**56-2291361**

Applied For

Not Applicable

Zip

**32117** **Polusia**

Zip

**32117** **Polusia**

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name

**Joe Loguidice**

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

**1515 Ridge Wood Ave Ste A**

City

**HH**

FL

**32117**

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

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

(NOTE: Registered agent signature required when resigning)

**3/31/05**

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.

☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D**  
NAME **Hawley, mark**  
STREET ADDRESS **208 malabar St**  
CITY-ST-ZIP **AUSTIN TX 78734**

TITLE **D**  
NAME **Walla Steve**  
STREET ADDRESS **208 malabar St**  
CITY-ST-ZIP **AUSTIN TX 78734**

TITLE  
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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Mark Hawley**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/31/05**

Date

Digitize: Phone 1

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

ATTACHMENT

40047321  
# P02000098830

March 17, 2005

Dear Sir or Madam:

This letter is to inform your office that I never received my UBR form to file it for 2004. I have my mail going to my CPA at the address we requested to have all mail change to. I called the Dep of state and they advised me to download a blank form. Your office also advised me to send a letter stating I did not receive my form and give the correct mailing address so the form can get to me on time next year. Your office said all penalties would be waved. Thank you for your time in concerning this matter. Also do to the Hurricanes this has delayed my bill processing and payments. Your office has payment on file for 2004, and I was told to send in 2005 UBR form and a check for 2005.

Sincerely,

First Dealer Resource