

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90163 040 ***150.00

DOCUMENT # P93000057967



1. Entity Name
WHEELED COACH ENTERPRISES, INC.

Principal Place of Business
2737 N FORSYTH RD
WINTER PARK FL 32792

Mailing Address
2737 N FORSYTH RD
WINTER PARK FL 32792



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2809315
59-2809315-3205527

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COLLINS, DON L
157 E NEW ENGLAND AVE
STE 364
WINTER PARK FL 32789-7007

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	C	<input type="checkbox"/> Delete
NAME	COLLINS, DON L.	
STREET ADDRESS	2737 N FORSYTH RD	
CITY-ST-ZIP	WINTER PARK FL 32792	
TITLE	VD	<input type="checkbox"/> Delete
NAME	COLLINS, DONALD L.	
STREET ADDRESS	2737 N FORSYTH RD	
CITY-ST-ZIP	WINTER PARK FL 32792	
TITLE	S	<input type="checkbox"/> Delete
NAME	SAYRE, LARRY W	
STREET ADDRESS	2737 N FORSYTH RD	
CITY-ST-ZIP	WINTER PARK FL 32792	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	WAITS, JIM	
STREET ADDRESS	2737 N FORSYTH RD	
CITY-ST-ZIP	WINTER PARK FL 32792	
TITLE	EVD	<input type="checkbox"/> Delete
NAME	COLLINS, ROBERT J	
STREET ADDRESS	2737 N FORSYTH RD	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	VF	<input checked="" type="checkbox"/> Delete
NAME	SAYRE, LARRY W	
STREET ADDRESS	2737 N FORSYTH RD	
CITY-ST-ZIP	WINTER PARK FL 32792	

TITLE	C/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLLINS, DON L.	
STREET ADDRESS	157 E NEW ENGLAND AVE, STE 364	
CITY-ST-ZIP	WINTER PARK, FL 32789	
TITLE	V/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLLINS, DONALD LYNN	
STREET ADDRESS	15 COMPOUND DRIVE	
CITY-ST-ZIP	HUTCHINSON, KS 67502	
TITLE	S/VF/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAYRE, LARRY W.	
STREET ADDRESS	15 COMPOUND DRIVE	
CITY-ST-ZIP	HUTCHINSON, KS 67502	
TITLE	AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARK, TERRY L.	
STREET ADDRESS	15 COMPOUND DRIVE	
CITY-ST-ZIP	HUTCHINSON, KS 67502	
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLLINS, ROBERT J.	
STREET ADDRESS	2737 N. FORSYTH RD	
CITY-ST-ZIP	WINTER PARK, FL 32792	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Larry W. Sayre 3/24/03

Date

Daytime Phone #

CR2E034 (10/02)