

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90483 043 ***158.75



DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000047488

1. Entity Name
GOOLS AUTOMOTIVE, INC.

Principal Place of Business
5013 20 AV S
SAINT PETERSBURG FL 33707

Mailing Address
5013 20 AV S
SAINT PETERSBURG FL 33707

2. Principal Place of Business
Gools Automotive, Inc.
 Suite, Apt. #, etc.
5013 - 20th Ave. So.

3. Mailing Address
Gools Automotive, Inc.
 Suite, Apt. #, etc.
5013 - 20th Ave. So.

City & State
Gulfport, FL
Zip
33707

City & State
Gulfport, FL
Zip
33707

4. FEI Number **59-3251651**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GOOLSBY, KENNETH
2958 5TH AVENUE SOUTH
ST. PETERSBURG FL 33712

7. Name and Address of New Registered Agent

Name - **Goolsby, Kenneth**
Street Address (P.O. Box Number is Not Acceptable)
5013 - 20th Ave. So.
City **Gulfport** **FL** **Zip Code** **33707**

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)

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 ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	GOOLSBY, KENNETH	
STREET ADDRESS	2958 5TH AVE. S.	
CITY-ST-ZIP	ST. PETERSBURG FL 33712	
TITLE	V	☐ Delete
NAME	GOOLSBY, EULA	
STREET ADDRESS	2958 5TH AVENUE S	
CITY-ST-ZIP	ST. PETERSBURG FL 33712	
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	P	☒ Change. ☐ Addition
NAME	GOOLSBY, Kenneth	
STREET ADDRESS	5013 20th Ave. So.	
CITY-ST-ZIP	Gulfport, FL 33707	
TITLE	V	☒ Change ☐ Addition
NAME	Goolsby, Eula	
STREET ADDRESS	5013 20th Ave. So.	
CITY-ST-ZIP	Gulfport, FL 33707	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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: *Kenneth Goolsby*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/02 (927) 321-8090
 Date Daytime Phone #

CR2E034 (9/01)