

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000052881

1. Entity Name

GOLF CARS OF FLORIDA, INC.

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90046 025 ***150.00

Principal Place of Business

Mailing Address

3572 SE DIXIE HIGHWAY
STUART FL 34997
US

3572 SE DIXIE HIGHWAY
STUART FL 34997
US

2. Principal Place of Business

90 CRYSTAL RUN ROAD

3. Mailing Address

90 CRYSTAL RUN ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 406

SUITE 406

City & State

City & State

MIDDLETOWN NY

MIDDLETOWN NY

Zip

Country

Zip

Country

10941

USA

10941

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

58-2128253

Applied For

Not Applicable

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

BLANTON, EDWIN F ESQ.
825 THOMASVILLE ROAD
TALLAHASSEE FL 32303

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/28/00

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V	☒ Delete
NAME	JOHNSON, CHARLES	
STREET ADDRESS	3572 SE DIXIE HIGHWAY	
CITY-ST-ZIP	STUART FL	
TITLE	S	☒ Delete
NAME	SHOAP, MARIE	
STREET ADDRESS	RT. 29, BOX 158	
CITY-ST-ZIP	COLLEGEVILLE PA	
TITLE	P	☒ Delete
NAME	KELLY, JOSEPH A. SR.	
STREET ADDRESS	RT 29, BOX 158	
CITY-ST-ZIP	COLLEGEVILLE PA	
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	PRESIDENT/CEO	☐ Change ☒ Addition
NAME	NORMAN J. KRINEY, JR.	
STREET ADDRESS	90 CRYSTAL RUN ROAD-SUITE 406	
CITY-ST-ZIP	MIDDLETOWN NY 10941	
TITLE	VICE PRESIDENT/COO	☐ Change ☒ Addition
NAME	DONALD J. PARIS	
STREET ADDRESS	90 CRYSTAL RUN ROAD-SUITE 406	
CITY-ST-ZIP	MIDDLETOWN NY 10941	
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)(l), 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/00

Date

914-695-1199

Daytime Phone #

CR2E034 (9/99)