## 2001 UNIFORM BUSINESS REPORT (UBR)

## Sep 14, 2001 8:00 am Secretary of State P94000065404 DOCUMENT # 1. Entity Name 09-14-2001 90009 003 \*\*\*550.00 SOUTH LUBES, INC. Principal Place of Business Mailing Address 1890 KINGSLEY AVENUE 1890 KINGSLEY AVENUE じいひくりききり SUITE 104 SUITE 104 **ORANGE PARK FL 32073** ORANGE PARK FL 32073 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3282425 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HUNTLEY, LOUIS L Street Address (P.O. Box Number is Not Acceptable) 1890 KINGSLEY AVENUE SUITE 104 **ORANGE PARK FL 32073** City 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) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CVDS CR2E034 (5/01) TITLE ☐ Delete TITLE Change ☐ Addition HUNTLEY, LOUIS L HUNTLEY, LOUIS L NAME NAME 1890 KINGSLEY AVE, SUITE 104 1890 KINGILEY AVE, JUITE 104 STREET ADDRESS STREET ADDRESS **ORANGE PARK FL 32073** CITY-ST-ZIP CITY-ST-7IP ORANGE PARK FL PD ☐ Change TITLE ☐ Delete TITLE ☐ Addition HUNTLEY, L. W NAME NAME 1890 KINGSLEY AVE, SUITE 104 STREET ADDRESS STREET ADDRESS **ORANGE PARK FL 32073** CITY-ST-ZIP CITY-ST-ZIP Change Daddition TITLE ☐ Delete TITLE SANDERS, DWAIN D NAME NAME 1890 KINGSLEY AVE, SUITE 104 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF ORANGE PARK FL 32073 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change GAY, W.W. NAME NAME 1890 KINGSLEY AVE, SUITE 104 STREET ADDRESS STREET ADDRESS ORANGE PARK FL 32073 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Addition ☐ Change DEMETREE, JACK NAME NAME STREET ADDRESS 1890 KINGSLEY AVE, SUITE 104 STREET ADDRESS ORANGE PARK FL 32073 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P

13. I hereby certify that the information supplied with this filing boes 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 leport 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 empropered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

WREDURED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

Daytime Phone #