

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2002 8:00 am
Secretary of State

04-07-2002 90056 003 ***150.00

0602793 AV

DOCUMENT # P95000033274

1. Entity Name
K. J. AUTO BROKERS, INC.

Principal Place of Business
**2401 FRANCIS AVE.
NAPLES FL 34112**

Mailing Address
**2401 FRANCIS AVE.
NAPLES FL 34112**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0599517**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HALTIGAN, JOHN
2401 FRANCIS AVE
NAPLES FL 34112**

7. Name and Address of New Registered Agent

Name **James T. Haltigan**
Street Address (P.O. Box Number is Not Acceptable) **2401 Francis Avenue**
City **Naples** **FL** Zip Code **34112**

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 **John J. Haltigan**
Signature, typed or printed name of registered agent and title if applicable.

[Signature]
Signature of Registered Agent required when reinstating)

3/28/02
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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME **HALTIGAN, JOHN J**
STREET ADDRESS **2842 ARBUTUS STREET**
CITY-ST-ZIP **NAPLES FL 34112** **Resigning**

TITLE **VP** ☐ Delete
NAME **HALTIGAN, JAMES T**
STREET ADDRESS **4105 SE 1ST COURT**
CITY-ST-ZIP **CAPE CORAL FL 33904**

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 ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **President** ☒ Change ☐ Addition
NAME **James T. Haltigan**
STREET ADDRESS **4105 SE 1st Court**
CITY-ST-ZIP **Cape Coral, FL 33904**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/02 (293) 774-0777

Date

Daytime Phone #

CR2E034 (9/01)