

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2002 8:00 am**  
**Secretary of State**

04-30-2002 90127 002 \*\*\*158.75

**DOCUMENT # P96000049224**

1. Entity Name  
**HERCULES MOTOR CAR COMPANY**

Principal Place of Business

2502 N 70TH ST  
 TAMPA FL 33619

Mailing Address

2502 N 70TH ST  
 TAMPA FL 33619

2. Principal Place of Business:

2502 N. 70th St.

Suite, Apt. #, etc.

3. Mailing Address

Same

Suite, Apt. #, etc.

City & State

Tampa FL

City & State

Same

4. FEI Number

59-3425210

Applied For

Not Applicable

Zip

33619

Country

Hills

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

TAYLOR, CECIL M  
 2502 N 70TH ST  
 TAMPA FL 33619

7. Name and Address of New Registered Agent

Name Taylor Cecil M

Street Address (P.O. Box Number is Not Acceptable)

2502 N. 70th St.

City Tampa

FL

Zip Code

33619

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

Cecil M. Taylor

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/15/02

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	TAYLOR, CECIL M	
STREET ADDRESS	10145 CURLEY RD	
CITY-ST-ZIP	SAN ANTONIO FL 33576	
TITLE	VS	<input type="checkbox"/> Delete
NAME	MOORE, GREG	
STREET ADDRESS	9816 U.S. HWY 92	
CITY-ST-ZIP	TAMPA FL 33610	
TITLE	S	<input type="checkbox"/> Delete
NAME	TAYLOR, FERN	
STREET ADDRESS	10145 CURLEY RD	
CITY-ST-ZIP	SAN ANTONIO FL 33576	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: Cecil M. Taylor  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)