2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State
05-16-2001 90359 039 ***150.00

DOCUMENT # P91000016819

1. Entity Name

STUART JEEP, INC.

Principal Place of Business: 2755 S.E. FEDERAL HIGHWAY, STUART, FL 34994

Mailing Address: 2755 S.E. FEDERAL HWY, STUART, FL 34994

C0068012

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 2755 SE FEDERAL HWY	3. Mailing Address
Suite, Apt. #, etc. STUART FLORIDA	Suite, Apt. #, etc.
City & State	City & State
Zip 34994 / Country MARTIN	Zip / Country

4. FEI Number 65-0736714 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RIFKIN, AVRON C.
800 SE MONTEREY COMMONS BLVD.
SUITE 200, STUART, FL 34996

7. Name and Address of New Registered Agent

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

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 [illegible]
After MAY 1, 2001 Fee will be $550.00
[illegible] Check Payable to Department of St[illegible]

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 / NAME / STREET ADDRESS / CITY-ST-ZIP: THOMAS P. WILLETT, 1 SW OSCEOLA ST., SUITE 1, STUART, FL 34994, PRESIDENT ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: MARGARET RICHEBOURG, 1 SW OSCEOLA STREET, STUART, FL 34994, VICE PRESIDENT ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
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CR2E034 (11/00)

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] 5/1/01 561-220-3600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #