

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000027467

1. Entity Name

NATIONAL LEASING OF ORMOND, INC.

FILED
Jan 20, 2000 8:00 am
Secretary of State

01-20-2000 90088 038 ***158.75

Principal Place of Business

Mailing Address

876 S NOVA ROAD
ORMOND BEACH FL 32174

876 S NOVA ROAD
ORMOND BEACH FL 32174-7334

2. Principal Place of Business

648 MASON AVE.

3. Mailing Address

648 MASON AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

DAYTONA, Florida

City & State

DAYTONA FL.

4. FEI Number

59-3455529

Applied For

Not Applicable

Zip

32117

Country

U.S.A.

Zip

32117

Country

U.S.A.

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

LADE, TERRY S
876 S NOVA ROAD
ORMOND BEACH FL 32174

Name

LADE, TERRY S.

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

648 MASON AVE.

City

DAYTONA

FL

Zip Code

32117

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

TERRY S. LADE

1-12-00

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 \$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	PVD	<input type="checkbox"/> Delete
NAME	LADE, TERRY S	
STREET ADDRESS	876 S NOVA ROAD	
CITY-ST-ZIP	ORMOND BEACH FL 32174	
TITLE	SD	<input type="checkbox"/> Delete
NAME	TUTTOLOMONDO, JAMES	
STREET ADDRESS	876 S NOVA ROAD	
CITY-ST-ZIP	ORMOND BEACH FL 32174	
TITLE	V	<input type="checkbox"/> Delete
NAME	LADE, TERRY SR	
STREET ADDRESS	731 N FLAMINGO DR	
CITY-ST-ZIP	HOLLY HILL FL 32117	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LADE, TERRY S.	
STREET ADDRESS	648 MASON AVE.	
CITY-ST-ZIP	DAYTONA Bch, FL. 32117	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TUTTOLOMONDO, JAMES	
STREET ADDRESS	648 MASON AVE.	
CITY-ST-ZIP	DAYTONA Bch, FL. 32117	
TITLE	M	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LADE, TERRY SR.	
STREET ADDRESS	648 MASON AVE.	
CITY-ST-ZIP	DAYTONA Bch, FL. 32117	
TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHN M. ZUCCARELLI	
STREET ADDRESS	104 Lighthouse Dr.	
CITY-ST-ZIP	JUPITER INLET COLONY, FL. 33469	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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

TERRY S. LADE

Date

1-12-00

Daytime Phone #

904-255-4741

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)