

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2002 8:00 am
Secretary of State

08-15-2002 90046 043 ***150.00

DOCUMENT # P97000032694

1. Entity Name
AUTO TRIM DESIGN OF PANAMA CITY INC.

Principal Place of Business
730 AIRPORT RD
PANAMA CITY FL 32405-4003
US

Mailing Address
730 AIRPORT RD
PANAMA CITY FL 32405-4003
US

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 **59-3457451**

Applied For

Not Applicable

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

SPENCE, CHARLES H
730 AIRPORT ROAD
PANAMA CITY FL 32405-4003

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **P** ☐ Delete
NAME **SPENCE, CHARLES H**
STREET ADDRESS **730 AIRPORT RD**
CITY-ST-ZIP **PANAMA CITY FL 32405**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: *Charles H. Spence* **13/08/02 (850) 258-2128**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)

AUTO TRIM DESIGN OF PANAMA CITY INC.



730 AIRPORT ROAD ♦ PANAMA CITY FL 32405

Phone (850) 763-9870

Attachments

974437

August 13, 2002

FLORIDA DEPARTMENT OF STATE
Uniform Business Report Department
PO Box 1500
Tallahassee, FL 32302-1500

Re: Auto Trim Design of Panama City Inc.
Document # ~~P97000032694~~
2002 Uniform Business Report Filing

Dear Sirs

In accordance with my telephone conversation today with your department, I hereby state that the first notice of filing this Report, due by May 1, 2002, was never received by me.

I am herewith enclosing the second notice of this report, which was received in my office today, fully executed, with my check in the amount of \$150.00, covering its filing.

Your office has stated that since I did not receive the first report, the filing fee of \$550.00 does not apply, and therefore, the amount of \$150.00 would be acceptable.

Your kind attention to this matter is duly appreciated.

AUTO TRIM DESIGN OF PANAMA CITY INC.

Charles H. Spence, President.

CHS/pj
Enclosure - check for \$150.00.