

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P97000087246**

1. Entity Name

FLEET TRUCK LEASING, INC.**FILED**
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90167 041 ***150.00

0334250

Principal Place of Business

Mailing Address

7423 US HWY 301 S
RIVERVIEW FL 335691971 W. LUMSDEN RD. #362
BRANDON FL 33511

00033660

2. Principal Place of Business

1406 TECH BLVD

Suite, Apt. #, etc.

3. Mailing Address

PMB: 362

Suite, Apt. #, etc.

1971 W. LUMSDEN RD

City & State

TAMPA FL

City & State

BRANDON FL

Zip

33619

Country

HILLSB.

Zip

33511

Country

HILLSB.

4. FEI Number

59-3475193

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

MCKINNEY, LARRY D
11315 MCMULLEN LOOP
RIVERVIEW FL 33569

7. Name and Address of New Registered Agent

Name

LARRY D MCKINNEY

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

1406 TECH BLVD

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

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

LARRY D. MCKINNEY, PRESIDENT 4-3-01

(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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DP
NAME MCKINNEY, LARRY D
STREET ADDRESS 11315 MCMULLEN LOOP
CITY-ST-ZIP RIVERVIEW FL 33569 ☐ DeleteTITLE DVS
NAME MCKINNEY, PEGGY C
STREET ADDRESS 11315 MCMULLEN LOOP
CITY-ST-ZIP RIVERVIEW FL 33569 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PEGGY C MCKINNEY
SECRETARY

Date

4-3-01 813-626-7008

Daytime Phone #

CR2E034 (10/00)