

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000057079

1. Entity Name

CAPITAL AUTOMOTIVE FINANCE CO.

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90030 016 ***150.00

Principal Place of Business

Mailing Address

3258 FOWLER ST.
FT. MYERS FL 33901

3258 FOWLER ST.
FT. MYERS FL 33907-2123

2. Principal Place of Business

5275 RAMSEY WAY

3. Mailing Address

5275 RAMSEY WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
FORT MYERS, FL

City & State
FORT MYERS

4. FEI Number 65-0856573

Applied For

Not Applicable

Zip
33907

Country
USA

Zip
33907

Country
USA

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

DRAKE, DALTON D
3258 FOWLER ST.
FT. MYERS FL 33901

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 *Dalton D. Drake*
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 VO
NAME DRAKE, DALTON D
STREET ADDRESS 3258 FOWLER ST
CITY-ST-ZIP FORT MYERS FL 33901 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME DRAKE, DALTON D.
STREET ADDRESS 5275 RAMSEY WAY
CITY-ST-ZIP FORT MYERS, FL 33907

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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: *Dalton D. Drake* *3/7/00* *941-936-4001*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)