

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000066397

1. Entity Name

BILLY'S AUTO SALES, INC.

**FILED**  
**May 08, 2000 8:00 am**  
**Secretary of State**

05-08-2000 90084 043 \*\*\*158.75

Principal Place of Business

Mailing Address

3482 COMMERCIAL WAY  
STE A  
SPRING HILL FL 34606

3482 COMMERCIAL WAY  
STE A  
SPRING HILL FL 34606-2621

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3524450

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

DYER, KIMBERLY A  
3482 COMMERCIAL WAY  
STE. A  
SPRING HILL FL 34606

Name

KIMBERLY A. TSOMPANIDIS

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

STE. C

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

*Kimberly A. Tsompanidis*

(NOTE: Registered Agent signature required when reinstating)

April 21, 2000

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 PVST  
NAME DYER, KIMBERLY A  
STREET ADDRESS 3482 COMMERCIAL WAY STE A  
CITY-ST-ZIP SPRING HILL FL 34606

☐ Delete

TITLE D  
NAME DYER, KIMBERLY ANN  
STREET ADDRESS 3482 COMMERCIAL WAY, SUITE A  
CITY-ST-ZIP SPRING HILL FL 34606

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME KIMBERLY A. TSOMPANIDIS  
STREET ADDRESS 3482 COMMERCIAL WAY STE. C  
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE  
NAME KIMBERLY A. TSOMPANIDIS  
STREET ADDRESS 3482 COMMERCIAL WAY STE. C  
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE D  
NAME WILLIAM J. TSOMPANIDIS  
STREET ADDRESS 3482 COMMERCIAL WAY STE. C  
CITY-ST-ZIP SPRING HILL FL 34606

☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
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 I am empowered.

SIGNATURE:

*Kimberly A. Tsompanidis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 21, 2000 (352) 6666614

Date

Daytime Phone #