

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000068707

FILED
Apr 15, 2003
Secretary of State

Entity Name: JOE BURNS AUTO CENTER, INC.

Current Principal Place of Business:

160 W. EVERGREEN AVE.
SUITE 140
LONGWOOD, FL 32750

Current Mailing Address:

160 W. EVERGREEN AVE.
SUITE 140
LONGWOOD, FL 32750

New Principal Place of Business:

160 W. EVERGREEN AVE.
SUITE 115
LONGWOOD, FL 32750

New Mailing Address:

160 W. EVERGREEN AVE.
SUITE 115
LONGWOOD, FL 32750

FEI Number: 59-3528339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNS, JOE
160 W. EVERGREEN AVE.
SUITE 140
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

BURNS, JOE
160 W. EVERGREEN AVE.
SUITE 115
LONGWOOD, FL 32750 US

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:

04/15/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BURNS, JOE
Address: 160 W. EVERGREEN AVE., STE 140
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BURNS, JOE
Address: 160 W. EVERGREEN AVE., STE 115
City-St-Zip: LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE BURNS

P

04/15/2003

Electronic Signature of Signing Officer or Director

Date