FILED

2002 Uniform Business Report (UBR)

Apr 02, 2002 8:00 am P99000027305 DOCUMENT # Secretary of State 1. Entity Name HARLOW MOTORCARS INC. 04-02-2002 90105 013 ***150.00 Mailing Address Principal Place of Business 6700 BOWDEN ROAD 6700 BOWDEN ROAD JACKSONVILLE FL 32216 JACKSONVILLE FL 32216 3. Mailing Address 2. Principal Place of Business 24741 DEER TRACE DR . DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. GO H D GAULTNEY Applied For City & State 4. FEI Number City & State 59-3567802 ONTE VEDRA BEACH, FL Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GAULTNEY, H. DENNY Address (P.O. Box Number is Not Acceptable) 6700 BOWDEN ROAD JACKSONVILLE FL 32216 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. H DENNY GAULTNEY tered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. (10/6) ☐ Addition TITLE ☐ Delete TITLE GAULTNEY, H. DENNY NAME NAME DEER TRACE DR 6700 BOWDEN ROAD STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32216 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.