

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000049990

1. Entity Name

N.W. FLORIDA AUTOMOTIVE, INC.

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90128 044 ***150.00

Principal Place of Business

Mailing Address

25 W. CEDAR ST., SUITE 306
PENSACOLA FL 32501

25 W. CEDAR ST., SUITE 306
PENSACOLA FL 32501-5945

2. Principal Place of Business

6389 HWY. 90 WEST

Suite, Apt. #, etc.

3. Mailing Address

6389 HWY. 90 WEST

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

MILTON, FL

Zip
32570

Country
USA

City & State

MILTON, FL

Zip
32570

Country
USA

4. FEI Number

59-3584813

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RODGERS, CASEY
25 W. CEDAR ST., SUITE 306
PENSACOLA FL 32501

7. Name and Address of New Registered Agent

Name

RICHARD M. COLBERT

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

ONE PENSACOLA PLAZA, SUITE 800

125 W. ROMANA STREET

City

PENSACOLA

FL

Zip Code

32591

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-17-00

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SHOTTENKIRK, GREGORY J
619 10TH ST.
FT. MADISON IO 52627 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D/P/S
SHOTTENKIRK, GREGORY J.
1202 DENMARK HILLTOP
FORT MADISON, IA 52627 ☒ 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

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

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

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:

Gregory J. Shottenkirk
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gregory J.
Shottenkirk

4-11-00

Date

(319) 372-6880

Daytime Phone #