

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000062504

1. Entity Name

ANKER AUTOMOTIVE, INC.

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90284 043 ***150.00

Principal Place of Business

Mailing Address

~~4114 MARVAEZ WAY SOUTH~~
~~ST. PETERSBURG FL 33712~~

~~4114 MARVAEZ WAY SOUTH~~
~~ST. PETERSBURG FL 33712-4007~~

2. Principal Place of Business

2701 CENTRAL AVE.

3. Mailing Address

2701 CENTRAL AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ST. PETERSBURG, FL

City & State

ST. PETERSBURG, FL

4. FEI Number

59-3587993

Applied For

Not Applicable

Zip

33713

Country

USA

Zip

33713

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

POWELL, JAMES N
NATIONSBANK TOWER, ONE PROGRESS PLAZA
STE. 1210
ST. PETERSBURG FL 33701

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

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 **D PRESIDENT** ☐ Delete
 NAME **ANKERBERG, CHARLES W SR.**
 STREET ADDRESS **P.O. BOX 15698**
 CITY-ST-ZIP **ST. PETERSBURG FL 33733-5698**

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

TITLE **D VICE PRESIDENT, TREAS., SECRETARY** ☐ Delete
 NAME **ANKERBERG, C. WARREN JR.**
 STREET ADDRESS **5190 44TH ST. SOUTH**
 CITY-ST-ZIP **ST. PETERSBURG FL 33711**

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

TITLE **D GENERAL MANAGER** ☐ Delete
 NAME **DANIELS, VERNON L**
 STREET ADDRESS **9440 55TH ST. NORTH**
 CITY-ST-ZIP **PINELLAS PARK FL 33782**

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

TITLE **D CHIEF MECHANIC** ☐ Delete
 NAME **SMITH, DOUGLAS S**
 STREET ADDRESS **3443 QUEENS ST. NORTH**
 CITY-ST-ZIP **ST. PETERSBURG FL 33713**

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

TITLE **D FACILITIES ENGINEER** ☐ Delete
 NAME **BERMAN, RONALD**
 STREET ADDRESS **1482 CLEARWATER LARGO RD. NW**
 CITY-ST-ZIP **CLEARWATER FL 33756**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 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:

Charles W. Ankerberg Jr., V.P.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
CHARLES W. ANKERBERG, JR. V.P.

4/26/00 **727-864-8442**
 Date Daytime Phone #

CR2E034 (9/99)