

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2001 8:00 am
Secretary of State

04-04-2001 90124 043 ***150.00

DOCUMENT # **P99000099813** ✓

1. Entity Name

OFF LEASE, INC.

Principal Place of Business

**35 DIAMOND DRIVE
 KEY WEST, FL 33040**

Mailing Address

**35 DIAMOND DRIVE
 KEY WEST, FL 33040**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

650973338

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRIFFEN, ALLEN

35 DIAMOND DRIVE

BIG COPPITT, FL 33040

Name **DAY, DWAYNE F**

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

27454 GUADALOUPE LANE

City **SUMMERLAND KEY**

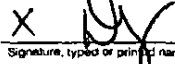
FL

Zip Code

33042

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

X 

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/26/2001

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, 2001 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 **P** ☒ Delete
 NAME **JONES, TREVOR**
 STREET ADDRESS **792 Diane Ave**
 CITY-STATE-ZIP **Little Torch Key FL 33042**

TITLE **V** ☒ Delete
 NAME **DAY, IVETA**
 STREET ADDRESS **27454 Guadalupe Ln**
 CITY-STATE-ZIP **Summerland Key FL 33042**

TITLE **S** ☒ Delete
 NAME **DAY, DWAYNE**
 STREET ADDRESS **27454 Guadalupe Ln**
 CITY-STATE-ZIP **Summerland Key FL 33042**

TITLE **T** ☒ Delete
 NAME **GRIFFEN, ALLEN**
 STREET ADDRESS **35 Diamond Dr**
 CITY-STATE-ZIP **Big Coppitt Key FL 33040**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P/D/T** ☐ Change ☒ Addition
 NAME **DAY, DWAYNE F.**
 STREET ADDRESS **27454 GUADALOUPE LANE**
 CITY-STATE-ZIP **SUMMERLAND KEY, FL 33042**

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

TITLE **S/A/T** ☐ Change ☒ Addition
 NAME **WHORTON, G PAUL**
 STREET ADDRESS **35 Diamond Dr**
 CITY-STATE-ZIP **Big Coppitt Key FL 33040**

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

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

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-STATE-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:

X 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

3/26/2001

Date

(305)295-8858

Daytime Phone #

CR2E034 (11/00)