FILED Jul 20, 2000 8:00 am Secretary of State 07-20-2000 90016 012 ***550.00

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000107284 1. Entity Name

FERN PARK AUTO SALES, INC.

Principal Place of Business

7220 HWY 17-92

Mailing Address

7220 HWY 17-92

CASSELBERRY FL 32707		CASSELBERRY FL 32707							
2 Principal Place	of Business	3. Mailing Address							
2. Principal Place of Business		3. Maining Address			1 1 00 11 001 110 10110 10111 00111 1	I BILLY BEBLEV TO BE LEVEL BERT	1 2 4010 11 00 11	 	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WE	RITE IN THIS SF	ACE		
City & State		City & State		4. 6	4. FEI Number 65 - 09 75007 Applied For Not Applicable				
^{Zip} 3 Հ 73	Country	Zip 32730	Country	5. (Certificate of Status Desired		8.75 Add	fitional	
	Name and Address of Current R	egistered Agent			Name and Address of New	Registered Ag	jent		
GREENE				Name					
GRENE,	KATHLEEN S	Street Address		Address (BO B	lox Number is Not Acceptab))			
4625 E. I	LAKE DRIVE	Street Address		Suuress (F.O. B	iox Number is not Acceptat	ne)		(
WINTER	SPRINGS FL 32708					<u> </u>			
							T 7:- 01		
			City			FL	Zip Code	e	
8. The above name	ed entity submits this statement for	the purpose of changing its	registered office	or registered ag	ent, or both, in the State of F	lorida.			
		and barbase at other 3 3 mg			,,				
OLONIATI (DE									
SIGNATURE Signate	ure, typed or printed name of registered agent an	d title if applicable. (NOTE	: Registered Agent sign	ature required when re	einstating)	DATE			
		EU E NOW!	I ERE IC CECO		1				
•	n is eligible to satisfy its Intangible ement and elects to do so.		FILE NOW!!! FEE IS \$550.00 fter SEPTEMBER 13, 2000 Min. will be \$75		10. Election Campaign F			May Be	
(See criteria on		Make Check Payab	-		Trust Fund Contribut	ion.	Added	to Fees	
		<u> </u>	<u></u>		DITIONS/CHANGES TO OF	EICEBS AND I	NDECTOR	C IN 11	
11.	OFFICERS AND D		12.				☐ Change	Addition	
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CITY-ST-ZIP					CA EL 3270			(F) = 4.00	
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NAME			NAME	1)	
STREET ADDRESS [CTREET ADDRESS	1					

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.

CITY-ST-ZIP

CITY-ST-ZIP

JIR PRAHALEER S GARELE