

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 14, 2000 8:00 am
Secretary of State

09-14-2000 90011 029 ***550.00

DOCUMENT # P99000108302

1. Entity Name
POWER SPORT DEALERS, INC.

Principal Place of Business

**617 HOLLY COURT
DUNEDIN FL 34698**

Mailing Address

**617 HOLLY COURT
DUNEDIN FL 34698**

2. Principal Place of Business

1497 MAIN ST

Suite, Apt. #, etc.

192

City & State
DUNEDIN FL

Zip
34698

Country
USA

3. Mailing Address

1497 MAIN ST

Suite, Apt. #, etc.

192

City & State
DUNEDIN FL

Zip
34698

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3615796

Applied For

Not Applicable

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

**HILKERT, DOUGLAS L
2557 NURSERY ROAD
SUITE A
CLEARWATER FL 33764**

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

9/11/2000

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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** ☐ Delete
NAME **DOVE, GARY LEE**
STREET ADDRESS **617 HOLLY COURT**
CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE ☒ Change ☐ Addition
NAME **1497 MAIN ST #192**
STREET ADDRESS **DUNEDIN, FL 34698**
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **MARVIN, WILLIAM J**
STREET ADDRESS **617 HOLLY COURT**
CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE ☒ Change ☐ Addition
NAME **1497 MAIN ST #192**
STREET ADDRESS **DUNEDIN, FL 34698**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/11/2000

CR2E034 (5/00)