2000 UNIFORM BUSINESS REPORT (UBR)

3. Mailing Address

City & State

Suite, Apt. #, etc.

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DOCUMENT # **S31201** LACEY AUTOMOTIVE GROUP, INC. Principal Place of Business Mailing Address 2655 NORTH VOLUSIA AVENUE 2655 NORTH VOLUSIA AVENUE POST OFFICE BOX 741120 POST OFFICE BOX 741120 ORANGE CITY FL 32774 ORANGE CITY FL 32774-1120

2. Principal Place of Business

SUITE 700 -

(See criteria on back)

Country

HUMPHRIES, J. GREGORY _201_EAST_PINE_STREET

ORLANDO FL 32801 - 4626

9. This corporation is eligible to satisfy its Intangible

LACEY, EDWARD T.

TABAR, PAULA L.

1521 ROBINWOOD DRIVE

DELAND FL

DELAND FL

2327 SOUTHERN PINES PLACE

Tax filing requirement and elects to do so.

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

11.

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-7IF

CITY-ST-ZIP

TITLE NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

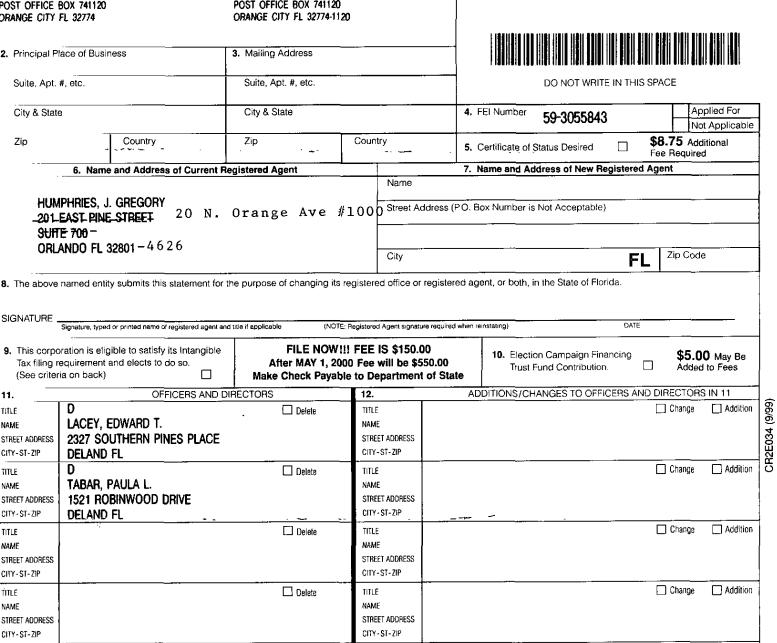
TITLE

NAMÉ STREET ADDRESS

CITY-ST-ZIP

FILED Mar 01, 2000 8:00 am **Secretary of State**

03-01-2000 90072 030 ***150.00



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 true tee 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 a decrease, with all other like empowered. changed, or on an attachme

TITLE

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Change

☐ Change

■ Addition

■ Addition