## 2000 UNIFORM BUSINESS REPORT (UBR)

## Apr 17, 2000 08:00 AM **DOCUMENT # \$81933** 1. Entity Name **Secretary of State** DEALERSHIP ACCOUNTING SERVICES, INC. Principal Place of Business Mailing Address 350 SOUTH LAKE DESTINY DRIVE 110 SE 6TH STREET 20TH FLOOR ET LAUDERDALE ORLANDO FL FL 32810 33301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3138671 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM 1200 S PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION $\mathbf{FL}$ 33324 Zip Code FL 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. 04/17/2000 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE TITLE Т Delete X Change ☐ Addition HYLE KATHLEEN NAME BOURHIS MARC $\mathbf{L}$ 110 SE 6TH ST, 20TH FL STREET ADDRESS STREET ADDRESS 110 SE 6TH ST, 20TH FL CITY-ST-ZIP FT LAUDERDALE 33301 CITY-ST-ZIP FT LAUDERDALE 33301 TITLE ☐ Delete ASAT TITLE X Change ☐ Addition NAME W. WARNER NAME JONATHAN P PEACOCK FERRANDO STREET ADDRESS 110 SE 6TH ST, 20TH FL STREET ACCRESS 110 SE 6TH ST, 20TH FL CITY-ST-ZIF FT LAUDERDALE FI. 33301 CITY-ST-718 FT LAUDERDALE FT. 33301 TITLE ☐ Delete TILE ☐ Change ☐ Addition NAME MEALEY DONALD NAME STREET ADDRESS 110 SE 6TH ST, 20TH FL STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE 33301 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition HIGGINBOTHAM NAME RONALD NAME STREET ADDRESS 110 SE 6TH ST, 20TH FL STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE 33301 CITY-ST-ZIP FL. TITLE DVS ☐ Delete TITLE X Change ☐ Addition NAME COLE JAMES NAME FERRANDO JONATHAN P 110 SE 6TH ST, 20TH FL 110 SE 6TH ST, 20TH FL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33301 FT LAUDERDALE FL33301 CITY-ST-ZIP TITLE D ☐ Delete TITLE ☐ Addition X Change NAME HAWKINS THOMAS MAROONE MICHAEL NAME STREET ADDRESS 110 SE 6TH ST, 20TH FL 110 SE 6TH ST, 20TH FL STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FT LAUDERDALE 33301 33301

**FILED** 

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<sup>13.</sup> 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.