

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 05, 2001 8:00 am
Secretary of State

05-05-2001 91105 012 ***158.75

DOCUMENT # V43386

1. Entity Name

ABRAXAS AUTOMOBILE ASSOCIATION COMPANY

Principal Place of Business

Mailing Address

**3449 EAST MAIN STREET
PAHOKEE FL 33476
US**

**11567 EAST RAMBLING DR.
WELLINGTON FL 33414**

2. Principal Place of Business

**3449 E MAIN STREET
Suite, Apt. #, etc.**

3. Mailing Address

**11567 EAST RAMBLING DR.
Suite, Apt. #, etc.**

City & State

PAHOKEE, FL

City & State

WELLINGTON, FL

Zip
33476

Country

USA

Zip

33414

Country

USA

4. FEI Number

65-0344246

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

**BIRD, JAMES
11567 EAST RAMBLING DRIVE
WELLINGTON FL 33414**

Name
JAMES BIRD

Street Address (P.O. Box Number is Not Acceptable)
11567 EAST RAMBLING DR.

City
WELLINGTON

FL

Zip Code
33414

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.

JAMES BIRD

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WALKER, CHRISTOPHER 2300 S.E. 13TH STREET POMPANO BEACH FL 33062 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BIRD, JAMES 11567 E. RAMBLING DRIE WELLINGTON FL 33414 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WALKER, CHRISTOPHER 2300 SE 13TH STREET POMPANO BEACH FL 33062 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BIRD, JAMES 11567 E. RAMBLING DRIVE WELLINGTON FL 33414 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	JAMES BIRD 11567 EAST RAMBLING DR WELLINGTON, FL 33414 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JAMES BIRD 11567 EAST RAMBLING DR WELLINGTON FL. 33414 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JAMES BIRD 11567 EAST RAMBLING DR WELLINGTON FL 33414 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JAMES BIRD 11567 EAST RAMBLING DR WELLINGTON FL 33414 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES BIRD

4/24/01

Date

**561 714 8709
561 333-2999**

Daytime Phone #

CR2E034 (10/00)