

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 23, 2000 8:00 am
Secretary of State

03-23-2000 90009 050 ***150.00

DOCUMENT # V65996

1. Entity Name

OLYMPIC MOTORS, INC.

Principal Place of Business

236 HWY 98
EAST POINT FL 32328
US

Mailing Address

P.O. BOX 919
EAST POINT FL 32328-0919
US

C0043401

2. Principal Place of Business

2841 Forest Hill Blvd "A"
Suite, Apt. #, etc.

3. Mailing Address

2841 Forest Hill Blvd. "A"
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

West Palm Beach
33406 Palm Beach

City & State

West Palm Beach
33406 Palm Beach

4. FEI Number

59-3143473

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FINCHER, JOHNNY R
1465 GULF BEACH DR.
ST. GEORGE ISLAND FL 32328

7. Name and Address of New Registered Agent

Name

LORETTA J. SWAIN

Street Address (P.O. Box Number is Not Acceptable)

1251 BARNSTABLE C.

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]

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

(NOTE: Registered Agent signature required when reinstating)

03/17/00
DATE

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, 2000 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

TITLE	PD	<input type="checkbox"/> Delete
NAME	SWAIN, HARRY L.	
STREET ADDRESS	2841 FOREST HILL BLVD "A"	
CITY-ST-ZIP	W PALM BCH FL 33406	
TITLE	UP	<input checked="" type="checkbox"/> Delete
NAME	SWAIN, LORETTA J	
STREET ADDRESS	2841 FOREST HILL BLVD "A"	
CITY-ST-ZIP	W PALM BCH FL 33406	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	UP D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Loretta J. Swain	
STREET ADDRESS	2841 Forest Hill Blvd. "A"	
CITY-ST-ZIP	W. Palm Beach, FL 33406	
TITLE	Wayne Carson	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Wayne Carson	
STREET ADDRESS	2570 Forest Hill Blvd. 103	
CITY-ST-ZIP	W. Palm Beach, FL 33406	
TITLE	UP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ulrike Carson	
STREET ADDRESS	2570 Forest Hill Blvd. 103	
CITY-ST-ZIP	W. Palm Beach, FL 33406	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/00

Date

561 642 0029

Daytime Phone #

CR2E034 (9/99)