

# CITY OF CLEARWATER

Post Office Box 4748, Clearwater, Florida 33758-4748

Clearwater Police Department, 645 Percé Street, Clearwater, Florida 33756

Telephone (727) 562-4242

POLICE DEPARTMENT

## CIVIL CITATION

CITATION NUMBER: \_\_\_\_\_

ISSUE DATE: 05/08/23      ISSUE TIME: 01:43 pm

NAME: Connie Simon

ADDRESS: Homeless

ZIP: \_\_\_\_\_

DATE VIOLATION OBSERVED: 05-08-23      TIME VIOLATION OBSERVED: 01:43 pm

Section of City Code Violated:

33.055. - Prohibited mooring, beaching or placing of vessels.

(2) It is unlawful for a person, firm, or corporation to store, leave, or abandon any derelict vessel in any navigable waters within the city. No vessel that is in an unregistered, derelict, wrecked, junked, or substantially dismantled condition shall be permitted to dock, moor, or tie up at any private seawall, dock, or moorage space within the city, except that such vessel may moor at licensed marine facilities for the purpose of repair.

DATE OF LAST INSPECTION: 05/08/23      Civil Penalty Due after hearing: \$105.00

OFFICER: J.PERZ

CPD Derelict Vessel Case Number CW22-68564

Dear Connie Simon:

**NOTICE TO THE OWNER AND ALL PERSONS INTERESTED IN THE PROPERTY (VESSEL) DESCRIBED HEREIN. The following property (vessel), to wit: 1987 38' house boat FL4796RN, is unlawfully upon public property known as 201 SEMINOLE ST. and must be removed within 5 days; otherwise, it will be removed and disposed of pursuant to chapter 705, Florida Statutes. The owner will be liable for the costs of removal, storage, and publication of notice.**



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CLEARWATER POLICE DEPARTMENT, 645 PIERCE STREET, CLEARWATER, FLORIDA 33756

TELEPHONE (727) 562-4242

## POLICE DEPARTMENT

You have been identified as the last known owner or responsible party for the above described vessel, which the undersigned law enforcement officer of the Clearwater Police Department (CPD) has determined to be derelict as defined in section 823.11, Florida Statutes, which is a violation of City of Clearwater Code of Ordinances section 33.055.

The facts upon which CPD has made the determination that the vessel described above is derelict are as follows:

**NARRATIVE:** (vessel discovery, owner information, reasonable cause, etc.)

On 05/08/23 this vessel was found to be derelict due to it being substantially damaged, it had no steering or propulsion.

The owner, Connie refused a propulsion test that was set for May 8 at 1300 hours.

The owner refused to remove the vessel from the water ways.

City of Clearwater Code of Ordinances section 33.055, along with sections 376.15 and 823.11, Florida Statutes, make it unlawful for any person, firm, or corporation to store, leave, or abandon any derelict vessel on the public waters of the State.

Subsection 705.101(3), Florida Statutes, defines all derelict vessels as abandoned property. Sections 376.15, 705.103, and 823.11, Florida Statutes, authorize law enforcement to remove or cause to be removed any derelict vessel from the public waters of the State and to destroy it. All costs incurred by law enforcement or authorized agents in the removal of the derelict vessel are recoverable against the owner or responsible party thereof.

In accordance with the above legislative mandate, CPD hereby orders you as the last known owner or party responsible for this vessel to remove it from the public waters of the State immediately or to provide proof that legal transfer of the vessel's ownership occurred prior to the date of this notice. Failure to do so will result in a hearing before a special magistrate pursuant to article 7 of the Clearwater Community Development Code, notice of hearing attached, at which hearing the City will seek to adjudicate a violation of City of Clearwater Code of Ordinances section 33.055. If the vessel is not removed from the public waters of the State, and you are found guilty of violating section 33.055, CPD intends to remove or cause the removal of this derelict vessel (if it has not already been removed), and the vessel will be destroyed.

# CITY OF CLEARWATER

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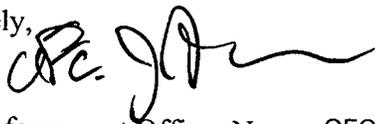
CLEARWATER POLICE DEPARTMENT, 645 PIERCE STREET, CLEARWATER, FLORIDA 33756

TELEPHONE (727) 562-4242

POLICE DEPARTMENT

The determination that this vessel is derelict may affect your interests. In addition to a fine, all costs of towing and storing will be assessed against you. As provided in section 705.103(4), Florida Statutes, a person who neglects or refuses to pay such costs may not be issued a certificate of registration for such vessel or for any other vessel or motor vehicle until such costs have been paid. If you choose not to attend the hearing, the City will proceed against you in your absence.

Sincerely,



Law Enforcement Officer Name: OFC. J. PERZ

Law Enforcement Officer Telephone Number: 727-562-4242

Clearwater Police Department

Enclosures

CNTY# AGY# SUB# RPT#  
 28 4 AEM 3468  
 AUDIT #



L# 3204780  
 T# 1015960992  
 B# 2016462  
 S# 61835794

STATE OF FLORIDA  
 APPLICATION FOR VEHICLE/VESSEL  
 CERTIFICATE OF TITLE

TITLE NUMBER 130402234	VEHICLE/VESSEL IDENTIFICATION # HMH01037A787	YR. MAKE 1987	MAKE OF MANUFACTURER HLZ	BODY TYPE VS	VEHICLE COLOR	W/LENGTH 37'8"	GVM/LOC		
DATE OF ISSUE MO. DAY YEAR 03 14 18	TRANS CODE OUT	VEHICLE USE VESSEL	HULL MATERIAL FBGLSS	PROPULSION IN/OUT	FUEL GAS	VESSEL TYPE CABIN	WATER SALT	FL NUMBER FL4796RN	AUTH DESTRUCTION

Applicant/Owner's Name & Address  
 HB SUITES LLC  
 4281 RUDDER WAY  
 NEW PORT RICHEY, FL 34652-4431

BIRTHDATE  
 SEX MO. DAY YEAR  
 RESIDENT Y N ALIEN  
 CNTY RES.#  
 28  
 1st OWNER FLD# OR F.E.I.D.#  
 2nd OWNER FLD# OR UNIT #

VOLUNTARY CONTRIBUTIONS

AGENCY FEE	TITLE FEE	SALES TAX	GRAND TOTAL
3.75	8.00	283.50	295.25

Action Requested: ORIG USED TITLE

Brands:

PREV STATE MD	DATE ACQUIRED 10/21/2015	NEW <input checked="" type="checkbox"/>	USED XX	ODOMETER / VESSEL MANUFACTURER HOLIDAY BOATS	ODOMETER DECLARATION CERTIFICATION <input type="checkbox"/>
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LIEN INFORMATION

NAME OF FIRST LIEN HOLDER:	DATE OF LIEN	RECEIVED DATE	FEBD # OR FL / DL AND SEX AND DATE OF BIRTH	DMV ACCOUNT #
ADDRESS				

SELLER INFORMATION

NAME OF SELLER, FLORIDA DEALER, OR OTHER PREVIOUS OWNER

ADDRESS

DEALER LICENSE NO.

CONSUMER OR SALES TAX EXEMPTION #

SALES TAX AND USE REPORT

INDICATE TOTAL PURCHASE PRICE, INCLUDING ANY UNPAID BALANCE DUE SELLER, BANK OR OTHERS \$ 4,050.00

INDICATE SALES OR USE TAX DUE AS PROVIDED BY CHAPTER 212, FLORIDA STATUTES \$ 283.50

TRANSFER OF TITLE  PURCHASER HOLDS VALID  
 IS EXEMPT FROM  EXEMPTION CERTIFICATE  
 FLORIDA SALES OR  VEHICLE / VESSEL WILL BE  
 USE TAX FOR THE  USED EXCLUSIVELY FOR RENTAL  
 REASON(S) CHECKED  OTHER  SELLING PRICE VERIFIED

APPLICANT CERTIFICATION

I/WE HEREBY CERTIFY THAT THE VEHICLE/VESSEL TO BE TITLED WILL NOT BE OPERATED UPON THE PUBLIC HIGHWAYS/WATERWAYS OF THIS STATE.

I CERTIFY THAT THE CERTIFICATE OF TITLE IS LOST OR DESTROYED.

I CERTIFY THAT THIS MOTOR VEHICLE/VESSEL WAS REPOSSESSED UPON DEFAULT OF THE LIEN INSTRUMENT AND IS NOW IN MY POSSESSION.

I/WE HEREBY CERTIFY THAT I/WE LAWFULLY OWN THE ABOVE DESCRIBED VEHICLE/VESSEL, AND MAKE APPLICATION FOR TITLE IF LIEN IS BEING RECORDED NOTICE IS HEREBY GIVEN THAT THERE IS AN EXISTING WRITTEN LIEN INSTRUMENT INVOLVING THE VEHICLE/VESSEL DESCRIBED ABOVE AND HELD BY LIENHOLDER SHOWN ABOVE. I/WE FURTHER AGREE TO DEFEND THE TITLE AGAINST ALL CLAIMS UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

Signature of Applicant/Owner  
 Signature of Applicant/Co-Owner

HSMV 82041 REVISED 02/05 SCAN CODE MVT

I UNDERSTAND THAT MY DRIVER LICENSE AND REGISTRATIONS WILL BE SUSPENDED IMMEDIATELY IF THE INSURER DENIES THE INSURANCE INFORMATION SUBMITTED FOR THIS REGISTRATION.



# STATE OF MARYLAND

KEEP IN A SAFE PLACE ANY ALTERATION OR ERASURE VOIDS THIS TITLE

## REPLACEMENT

<u>Vessel Identification Number</u>	<u>Hull Identification Number</u>	<u>Title Number</u>	<u>Issued Date</u>
MD 6668 AU	HMH01037A787	1148068	04/13/2010
<u>Model Year</u>	<u>Manufacturer</u>	<u>Length</u>	<u>Hull Material</u>
1987	HOLIDAY MN	37' 8"	FiberGlass
			<u>Type</u>
			Cabin

### Name(s) and Address(es) of Registered Owner(s)

WILLIAM M COOPER 25156 MORGAN RD Hollywood, MD 20636	JENELLE LYNN COOPER 25156 MORGAN RD Hollywood, MD 20636
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## CERTIFICATE OF TITLE FOR A VESSEL

I, THE UNDERSIGNED, HEREBY CERTIFY, PURSUANT TO THE PROVISIONS OF THE NATURAL RESOURCES ARTICLE OF THE ANNOTATED CODE OF MARYLAND, THAT AN APPLICATION FOR CERTIFICATE OF TITLE HAS BEEN MADE FOR THE VESSEL DESCRIBED HEREON, THAT THE APPLICANT(S) NAMED ON THE FACE HEREOF HAS BEEN DULY RECORDED AS THE LAWFUL OWNER(S); AND THAT THE APPLICANT(S) HAS CERTIFIED UNDER PENALTY OF PERJURY THAT THE VESSEL IS SUBJECT TO THE SECURITY INTERESTS SHOWN HEREON; THE DEPARTMENT OF NATURAL RESOURCES DOES NOT GUARANTEE THE STATEMENTS AS TO THE SECURITY INTEREST.

HMH01037A787~

1148068~

<b>M</b>	<b>D</b>								
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SECTION 1 ASSIGNMENT OF TITLE - TO BE COMPLETED IN FULL BY SELLER	SECTION 2 TO BE COMPLETED BY PURCHASER																											
IN CONSIDERATION OF THE SUM OF \$ <u>4050.00</u> RECEIPT OF WHICH IS HEREBY ACKNOWLEDGED, I SELL, ASSIGN OR TRANSFER TO:  NAME(S) OF PURCHASER(S) <u>H.B. Suites LLC</u>  THE VESSEL DESCRIBED ON THE FACE OF THIS TITLE, INCLUDING MOTOR AND ACCESSORIES, BUT EXCLUDING TRAILER, I STATE THAT AT THE TIME OF DELIVERY, THE VESSEL IS SUBJECT TO THE SECURITY INTEREST(S) STATED ON THE FACE OF THIS CERTIFICATE AND NONE OTHER. I CERTIFY, UNDER PENALTY OF PERJURY, THAT THE STATEMENTS MADE HEREIN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.  IF TRANSFER IS BETWEEN IMMEDIATE FAMILY MEMBERS, I FURTHER CERTIFY THAT THE PURCHASER IS MY _____ (SON, DAUGHTER, SPOUSE, ETC.)  SIGNATURE(S) OF SELLER(S) <u>[Signature]</u>  DATE <u>10/21/2015</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">TAX AND FEES</th> <th style="text-align: center;">AMOUNT PAID</th> </tr> <tr> <td>5% EXCISE TAX ON PURCHASE PRICE MINIMUM \$5.00 (IF NO DEALER DEDUCT 1.2%)</td> <td></td> <td></td> </tr> <tr> <td>INTEREST (1.5% of tax per month)</td> <td></td> <td></td> </tr> <tr> <td>PENALTY (10% of Excise Tax)</td> <td></td> <td></td> </tr> <tr> <td>TITLE FEE</td> <td style="text-align: right;">\$ 2.00</td> <td></td> </tr> <tr> <td>REGISTRATION FEE: VESSEL OVER 16 FEET OR POWERED AT OVER 7.5 H.P.</td> <td style="text-align: right;">\$24.00</td> <td></td> </tr> <tr> <td>VESSEL 16 FEET OR UNDER, POWERED AT 7.5 H.P. OR UNDER</td> <td style="text-align: right;">NO FEE</td> <td></td> </tr> <tr> <td>SECURITY INTEREST FILING FEE (IF LIEN IS TO BE FILED)</td> <td style="text-align: right;">\$ 15.00</td> <td></td> </tr> <tr> <td>MAKE CHECK PAYABLE TO "DNR"</td> <td style="text-align: right;"><b>TOTAL</b></td> <td></td> </tr> </table>	TAX AND FEES		AMOUNT PAID	5% EXCISE TAX ON PURCHASE PRICE MINIMUM \$5.00 (IF NO DEALER DEDUCT 1.2%)			INTEREST (1.5% of tax per month)			PENALTY (10% of Excise Tax)			TITLE FEE	\$ 2.00		REGISTRATION FEE: VESSEL OVER 16 FEET OR POWERED AT OVER 7.5 H.P.	\$24.00		VESSEL 16 FEET OR UNDER, POWERED AT 7.5 H.P. OR UNDER	NO FEE		SECURITY INTEREST FILING FEE (IF LIEN IS TO BE FILED)	\$ 15.00		MAKE CHECK PAYABLE TO "DNR"	<b>TOTAL</b>	
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MAKE CHECK PAYABLE TO "DNR"	<b>TOTAL</b>																											

SECTION 3 DEALER'S REASSIGNMENT OF TITLE - TO BE USED BY DEALERS ONLY	<input type="checkbox"/> BROKERAGE SALE
IN CONSIDERATION OF THE SUM OF \$ _____ RECEIPT OF WHICH IS HEREBY ACKNOWLEDGED, I SELL, ASSIGN OR TRANSFER TO (NAME(S) OF PURCHASER(S)) _____  THE VESSEL DESCRIBED ON THE FACE OF THIS TITLE, INCLUDING MOTOR AND ACCESSORIES, BUT EXCLUDING TRAILER, I STATE THAT AT THE TIME OF DELIVERY, THE VESSEL IS SUBJECT TO THE SECURITY INTEREST(S) STATED ON THE FACE OF THIS CERTIFICATE AND NONE OTHER. I CERTIFY, UNDER PENALTY OF PERJURY, THAT THE STATEMENTS MADE HEREIN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.  SIGNATURE(S) OF SELLER(S) <u>[Signature]</u> DATE _____ DEALER LICENSE NO. _____ TEMPORARY DECAL NO. _____ DATE ISSUED _____	TOTAL PURCHASE PRICE OR FAIR MARKET VALUE \$ _____  TRADE-IN VALUE (if applicable) \$ _____  NET PURCHASE PRICE \$ _____

SECTION 4 PURCHASER'S APPLICATION FOR CERTIFICATE(S) OF (CHECK ONE) TITLE & REGISTRATION <input type="checkbox"/> TITLE ONLY <input type="checkbox"/>			
EXCISE TAX MUST BE PAID WITHIN 30 DAYS OF MD TAX LIABILITY TO AVOID PENALTY AND INTEREST.			
NAME OF PURCHASER _____	IF DEALER <input type="checkbox"/>	NAME OF PURCHASER _____	
	DATE OF BIRTH: _____		DATE OF BIRTH: _____
ADDRESS OF PURCHASER _____		ADDRESS OF PURCHASER _____	
ORIG. DL LICENSE NO. _____	DL STATE _____	DRIVERS LICENSE NO. _____	DL STATE _____

SECTION 5 VESSEL INFORMATION (IF REGISTRATION IS REQUIRED)	SECTION 6 LIEN INFORMATION																											
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>VESSEL USE</th> <th>PROPULSION</th> <th>FUEL</th> <th>ENGINE</th> </tr> <tr> <td><input type="checkbox"/> Recreational</td> <td><input type="checkbox"/> Outboard</td> <td><input type="checkbox"/> Gasoline</td> <td>Manufacturer _____</td> </tr> <tr> <td><input type="checkbox"/> Commercial Fishing</td> <td><input type="checkbox"/> Inboard</td> <td><input type="checkbox"/> Diesel</td> <td rowspan="2">Horsepower _____</td> </tr> <tr> <td><input type="checkbox"/> Commercial or Other</td> <td><input type="checkbox"/> Inboard/Outdrive</td> <td><input type="checkbox"/> Electric</td> </tr> <tr> <td><input type="checkbox"/> Commercial Passenger</td> <td><input type="checkbox"/> Other</td> <td><input type="checkbox"/> Other</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Demonstration</td> <td><input type="checkbox"/> Sail Inboard Auxiliary</td> <td colspan="2">Engine Serial No. _____</td> </tr> <tr> <td><input type="checkbox"/> Colonial</td> <td><input type="checkbox"/> Sail Outboard Auxiliary</td> <td colspan="2"></td> </tr> </table>	VESSEL USE	PROPULSION	FUEL	ENGINE	<input type="checkbox"/> Recreational	<input type="checkbox"/> Outboard	<input type="checkbox"/> Gasoline	Manufacturer _____	<input type="checkbox"/> Commercial Fishing	<input type="checkbox"/> Inboard	<input type="checkbox"/> Diesel	Horsepower _____	<input type="checkbox"/> Commercial or Other	<input type="checkbox"/> Inboard/Outdrive	<input type="checkbox"/> Electric	<input type="checkbox"/> Commercial Passenger	<input type="checkbox"/> Other	<input type="checkbox"/> Other		<input type="checkbox"/> Demonstration	<input type="checkbox"/> Sail Inboard Auxiliary	Engine Serial No. _____		<input type="checkbox"/> Colonial	<input type="checkbox"/> Sail Outboard Auxiliary			NAME OF SECURED PARTY / LIEN HOLDER _____  ADDRESS OF SECURED PARTY _____  DATE OF LIEN _____  AMOUNT OF LIEN _____
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<input type="checkbox"/> Colonial	<input type="checkbox"/> Sail Outboard Auxiliary																											
Emergency Release: <input type="checkbox"/> On/Off <input type="checkbox"/> On/Off Location of Boat: COUNTY 5 RIVER/CREEK _____ IF TRAILERED CHECK HERE <input type="checkbox"/>	<b>FOR DEPARTMENT USE</b>																											

SECTION 7 PURCHASER'S CERTIFICATION	
I certify under penalty of perjury that I own the vessel described above and that the statements made on this application are true and correct to the best of my knowledge, information and belief.	
SIGNATURE(S) - ALL OWNERS MUST SIGN _____	DATE _____
<u>Cornie Simon, H.B. Suites LLC</u>	<u>10/14/16</u>

DNR 5-100

FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
APPLICATION FOR CERTIFICATE OF TITLE WITH/WITHOUT REGISTRATION
SUBMIT THIS FORM TO YOUR LOCAL TAX COLLECTOR OFFICE

www.flhsmv.gov/titles/

CHECK APPLICATION TYPE: [X] ORIGINAL [ ] TRANSFER VEHICLE TYPE: [ ] MOTOR VEHICLE [ ] MOBILE HOME [ ] VESSEL [ ] OFF-HIGHWAY VEHICLE [ ] ATV [ ] ROV [ ] MC

1 OWNER / APPLICANT INFORMATION
Customer Number: 727-252-3740
Owner's Name: H B SIOTES LLC
Co-Owner/Lessee's Name:
Owner's Mailing Address: 4281 RUDDER WAY, NEW PORT RICHEY, FL 34652
Date of Birth:
Sex:
FL Driver License or FEID/Suffix #: CUST# 247016651

2 MOTOR VEHICLE, MOBILE HOME OR VESSEL DESCRIPTION
Vehicle/Vessel Identification Number: HMH01037A787
Manufacturer: HOLIDAY
Year: 1987
Body: VS
Color:
Florida Title Number: APPLYING
Previous State of Issue: MD
Length: 37' 08"
HULL MATERIAL: Wood, Aluminum, Fiberglass, Steel, Wood/Fiberglass, Other
PROPULSION: Outboard, Sail, Inboard, Air Propelled, Inboard/Outboard, Other
FUEL: Gas, Diesel, Electric, Other
DRAFT OF VESSEL:
PREVIOUS OUT-OF-STATE REGISTRATION NUMBER:

3 BRANDS, USAGE AND TYPE (Check Applicable Boxes)
[ ] SHORT TERM LEASE [ ] LONG TERM LEASE [ ] REBUILT [ ] POLICE VEHICLE [X] PRIVATE USE [ ] TAXI CAB [ ] FLOOD [ ] LEV [ ] CUSTOM
[ ] ASSEMBLED FROM PARTS [ ] BONDED TITLE [ ] PIT CAR [ ] GLIDER KIT [ ] MANUF. BUY BACK [ ] REPLICA [ ] AUTONOMOUS [ ] ELECTRIC [ ] STREET ROD

4 LIENHOLDER INFORMATION
CHECK IF ELT CUSTOMER: [ ]
FEID #: [ ]
Date of Lien:
Lienholder's Name: NONE
Lienholder's Address:
City:
State:
Zip:

5 TRANSFER TYPE
IF OWNERSHIP HAS TRANSFERRED, HOW AND WHEN WAS THE VEHICLE, MOBILE HOME, OR VESSEL ACQUIRED?
[X] SALE [ ] GFT [ ] REPOSESSION [ ] COURT ORDER [ ] OTHER (SPECIFY) #050
DATE ACQUIRED: 10, 21, 2015

6 ODOMETER DECLARATION
WARNING: Federal and State law requires that you state the mileage in connection with an application for a Certificate of Title. Failure to complete or providing a false statement may result in fines or imprisonment.
I/WE STATE THAT THIS [ ] 5 OR [ ] 6 DIGIT ODOMETER NOW READS [ ] [ ] [ ] [ ] [ ] [ ] MILES. DATE READ [ ] [ ] [ ] AND I/WE HEREBY CERTIFY THAT TO THE BEST OF MY/CUR KNOWLEDGE THE ODOMETER READING:
[ ] 1. REFLECTS ACTUAL MILEAGE. [ ] 2. IS IN EXCESS OF ITS MECHANICAL LIMITS. [ ] 3. IS NOT THE ACTUAL MILEAGE.

7 DEALER SALES TAX REPORT AND VEHICLE TRADE IN INFORMATION (IF APPLICABLE)
FLORIDA SALES TAX REGISTRATION NUMBER:
DATE OF SALE:
DEALER LICENSE NUMBER:
AMOUNT OF TAX:
DEALER/AGENT SIGNATURE:
YEAR OF TRADE IN:
MAKE OF TRADE IN:
TITLE NUMBER OF TRADE IN (IF KNOWN):
VEHICLE IDENTIFICATION NUMBER OF TRADE IN:

**8 MOTOR VEHICLE IDENTIFICATION NUMBER VERIFICATION**

THIS SECTION REQUIRES A PHYSICAL INSPECTION AND A VERIFICATION OF THE VEHICLE IDENTIFICATION NUMBER (VIN) (OR THE MOTOR NUMBER FOR MOTOR VEHICLES MANUFACTURED PRIOR TO 1988) OF THE MOTOR VEHICLE DESCRIBED ON THIS FORM BY A LICENSED DEALER, FLORIDA NOTARY PUBLIC, POLICE OFFICER, OR FLORIDA DIVISION OF MOTOR VEHICLES EMPLOYEE OR TAX COLLECTOR EMPLOYEE. IF THE VIN IS VERIFIED BY AN OUT OF STATE MOTOR VEHICLE DEALER, THE VERIFICATION MUST BE SUBMITTED ON THEIR LETTERHEAD STATIONERY. COMPLETE THIS SECTION ON ALL USED MOTOR VEHICLES, INCLUDING TRAILERS, (WITH ABBREVIATION OF "TL" WITH A WEIGHT OF 2,000 POUNDS OR MORE) NOT CURRENTLY TITLED IN FLORIDA.

I, the undersigned, certify that I have physically inspected the above described vehicle and find the vehicle identification number to be: \_\_\_\_\_ (Vehicle Identification Number)

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_ PRINTED NAME \_\_\_\_\_

Law Enforcement Officer or Florida Dealer/Agency Name \_\_\_\_\_ Badge # or Florida Dealer # \_\_\_\_\_ Notary Stamp or Seal \_\_\_\_\_

FL DMV/Tax Collector Employee \_\_\_\_\_ Florida Compliance Examiner/Inspector Badge or ID Number \_\_\_\_\_

COMMERCIAL NAME OF FLORIDA NOTARY (Print, Type or Stamp) \_\_\_\_\_ NOTARY'S SIGNATURE \_\_\_\_\_

**9 SALES TAX EXEMPTION CERTIFICATION**

THE PURCHASE OF A RECREATIONAL VEHICLE TO BE OFFERED FOR RENT AS LIVING ACCOMMODATIONS DOES NOT QUALIFY FOR EXEMPTION. CERTIFY THE RECREATIONAL VEHICLE, MOBILE HOME OR VESSEL DESCRIBED HAS BEEN PURCHASED AND IS EXEMPT FROM THE SALES TAX IMPOSED BY CHAPTER 212, FLORIDA STATUTES, BY:

- PURCHASER (STATE AGENCIES, COURTESY, ETC.) HOLDS VALID EXEMPTION CERTIFICATE \_\_\_\_\_ CONSUMER'S CERTIFICATE OF EXEMPTION NUMBER \_\_\_\_\_
- MOTOR VEHICLE  MOBILE HOME  VESSEL WILL BE USED EXCLUSIVELY FOR RENTAL \_\_\_\_\_ SALES TAX REGISTRATION NUMBER \_\_\_\_\_

I hereby certify that ownership of the motor vehicle, mobile home or vessel described on this application, is not subject to Florida Sales and Use Tax for the following reason:  INHERITANCE  GIFT

- DIVORCE DECREE  TRANSFER BETWEEN A MARRIED COUPLE  EVEN TRADE OR TRADE DOWN (State the facts of the even trade or trade down and the transferor information, including the transferor's name and address, below under "Other: Explain.")
- OTHER: (EXPLAIN) \_\_\_\_\_

**10 REPOSSESSION DECLARATION**

IF CHECKED, THE FOLLOWING CERTIFICATIONS ARE MADE BY THE APPLICANT:

- I CERTIFY THAT THIS MOTOR VEHICLE, MOBILE HOME OR VESSEL WAS REPOSSESSED UPON DEFAULT IN THE TERMS OF THE LIEN INSTRUMENT AND IS NOW IN MY POSSESSION.
- (VESSEL) A PHOTOCOPY OF THE LIEN INSTRUMENT FOR THE VESSEL IS REQUIRED AND ATTACHED.
- I AM REQUESTING THAT AN ORIGINAL CERTIFICATE OF REPOSSESSION BE ISSUED FOR THE MOTOR VEHICLE OR MOBILE HOME IN LIEU OF A TITLE (REPOSSESSION).
- I AM REQUESTING THAT A DUPLICATE CERTIFICATE OF REPOSSESSION BE ISSUED FOR THE MOTOR VEHICLE OR MOBILE HOME, AS THE ORIGINAL HAS BEEN LOST OR DESTROYED.

**11 NON-USE AND OTHER CERTIFICATIONS**

IF CHECKED, THE FOLLOWING CERTIFICATIONS ARE MADE BY THE APPLICANT:

- I CERTIFY THAT THE CERTIFICATE OF TITLE IS LOST OR DESTROYED.
- THE VEHICLE IDENTIFIED WILL NOT BE OPERATED ON THE STREETS AND HIGHWAYS OF THIS STATE UNTIL PROPERLY REGISTERED.
- THE VESSEL IDENTIFIED WILL NOT BE OPERATED ON THE WATERS OF THIS STATE UNTIL PROPERLY REGISTERED.
- OTHER: (EXPLAIN) \_\_\_\_\_

**12 APPLICATION ATTESTMENT AND SIGNATURES**

I HAVE PHYSICALLY INSPECTED THE ODOMETER AND FURTHER AGREE TO DEFEND THE TITLE AGAINST ALL CLAIMS. (More than one form HSMV 82040 may be used for additional signatures.) UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

*Connie L...* 03-14-2018  
SIGNATURE OF APPLICANT (OWNER) \_\_\_\_\_ Date \_\_\_\_\_ SIGNATURE OF APPLICANT (CO-OWNER) \_\_\_\_\_ Date \_\_\_\_\_

**13 RELEASE OF SPOUSE OR HEIR'S INTEREST**

The undersigned person(s) state(s) as follows: That \_\_\_\_\_ (Name of Deceased) died on \_\_\_\_\_ (Date)

- testate (with a will)  intestate (without a will) and left the surviving heir(s) named below.
- When applicable, the heir(s) (named below) certifies that the certificate of title is lost or destroyed.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

Print or Type Name of Spouse, Co-owner or Heir(s) \_\_\_\_\_ Signature of Spouse, Co-Owner or Heir(s) \_\_\_\_\_

That at the time of death the decedent was owner of the motor vehicle, mobile home or vessel described in section 2 of this form. The person(s) signing above hereby releases all of his/her/their right, title, interest and claim as heir(s) at law, legatee(s), devisee(s), or otherwise to the aforesaid motor vehicle, mobile home or vessel to:

Name of Applicant(s) (Print or Type) \_\_\_\_\_

RESIDENTS OF FLORIDA AND ALL VESSEL OWNERS, RESIDING IN FLORIDA OR OUT OF STATE, SHOULD SUBMIT THIS FORM AND ALL REQUIRED DOCUMENTATION TO A LOCAL FLORIDA TAX COLLECTOR'S OFFICE OR THE FLORIDA TAX COLLECTOR'S OFFICE LOCATED IN THE APPLICANT'S COUNTY OF RESIDENCE FOR PROCESSING.

Check your local phone book government pages or visit the following website for current mailing addresses: <http://www.flhsmv.gov/offices/>

**Detail by Entity Name**

Florida Limited Liability Company  
**HB SUITES LLC**

Filing Information

**Document Number** L16000065581  
**FE/EIN Number** 81-1918861  
**Date Filed** 03/28/2016  
**Effective Date** 03/22/2016  
**State** FL  
**Status** ACTIVE

Principal Address

4281 RUDDER WAY  
NEW PORT RICHEY, FL 34652

Changed: 03/03/2018

Mailing Address

4281 RUDDER WAY  
NEW PORT RICHEY, FL 34652

Registered Agent Name & Address

Simon, Connie  
4281 RUDDER WAY  
NEW PORT RICHEY, FL 34652

Name Changed: 03/03/2018

Authorized Person(s) Detail

**Name & Address**

Title MGR

SIMON, CONNIE  
4281 RUDDER WAY  
NEW PORT RICHEY, FL 34652

Annual Reports

Report Year	Filed Date
2017	04/28/2017
2018	03/03/2018

2470/0657

Document Images

03/03/2018 - ANNUAL REPORT	<a href="#">View image in PDF format</a>
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Florida Department of State, Division of Corporations



# STATE OF FLORIDA

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Time printed: 5/4/2023 11:08:44 AM EST

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License Number:

SSN:

Document Type: MV TITLES

License Class:

Gender: UNKNOWN

Number of Pages: 6

Title Number: 130402234

Transaction ID: 1015960992

Number of Pages: 6

Document Type: MV TITLES

Page No: 1

User ID:

Image Key:

CW23-68564

