


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 08, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # H91132**  
 1. Entity Name  
 NEBHART, INC.



Principal Place of Business % F. I. NEBHART, JR. 5409 N. STANFORD DRIVE NASHVILLE, TN 37215	Mailing Address % F. I. NEBHART, JR. 5409 N. STANFORD DRIVE NASHVILLE, TN 37215
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**DO NOT WRITE IN THIS SPACE**



01032007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2611852	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  
 NEBHUT, F.I., JR.  
 C/O GUNSTER, YOAKLEY  
 10 CENTRAL PARKWAY  
 STUART, FL 33494

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

U00000577439  
 01/08/07-80016-016 150.00

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NEBHUT, F. I., JR. 5409 N. STANFORD DR. NASHVILLE, TN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HART, H. RODES 612-10TH AVE NORTH NASHVILLE, TN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *M. Nebhut, Jr.* Date: Jan 4, 2007 Daytime Phone #: 615-665-0078  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR