

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N49255

FILED
May 16, 2002 8:00 AM
Secretary of State

Entity Name: NORTHWOOD BUSINESS DEVELOPMENT CORP.

Current Principal Place of Business:

519 25TH ST
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

Current Mailing Address:

519 25TH ST
WEST PALM BEACH, FL 33407 US

New Mailing Address:

FEI Number: 65-0352279

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUCKER, DAVID W
440 24 ST
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: RUCKER, DAVID W
Address: 561 N COUNTRY CLUB DR
City-St-Zip: ATLANTIS, FL 33462

Title: SD () Delete
Name: STARKEY, BETTE ANNE
Address: 213 29 ST
City-St-Zip: W. PALM BEACH, FL 33407

Title: ATD () Delete
Name: AFRECHETTE, WAYNE
Address: 4520 BROADWAY
City-St-Zip: WEST PALM BEACH, FL 33407

Title: P () Delete
Name: FLICK, CARL
Address: 221 34TH ST.
City-St-Zip: WEST PALM BEACH, FL 33407

Title: AP () Delete
Name: PACE, ANITA
Address: 1457 N. MAGNOLIA CIR.
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARL FLICK

P

05/16/2002

Electronic Signature of Signing Officer or Director

Date