## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPES OF PRINTED NAMEO Gerson,

## **FILED** Feb 01, 2000 8:00 am Secretary of State **DOCUMENT # 601864** 1. Entity Name NASON, YEAGER, GERSON, WHITE & LIOCE, P.A. 02-01-2000 90015 044 \*\*\*150.00 Mailing Address Principal Place of Business 1645 PALM BCH LKS BLVD 1645 PALM BCH LKS BLVD 908056 **SUITE 1200** SUITE 1200 WEST PALM BCH FL 33401-2214 WEST PALM BCH FL 33401 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1280063 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WHITE II, JOHN Street Address (P.O. Box Number is Not Acceptable) 1645 PALM BEACH LAKES BLVD. **STE 1200** WEST PALM BEACH FL 33401 City Zip Code 44周日本生命1000年 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. CHICKLY TOOK E SIGNATURE \_ Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change DAS DP Delete TITLE TITLE Yeager, Thomas ARMOUR II, ALAN I NAME NAME 1645 Palm Beach Lakes Blvd., Suite 1200 1645 PALM BCH LKS BLVD #1200 STREET ADDRESS STREET ADDRESS West Palm Beach, FL 33401 CITY-ST-ZIP WEST PALM BCH FL 33401 CITY-ST-7IP X Change ☐ Addition AT ☐ Delete TITLE TITLE Nason, Nathan E. NASON, NATHAN E NAME NAME 1645 Palm Beach Lakes Blvd., Suite 1200 STREET ADDRESS 1645 PALM BCH LKS BLVD #1200 STREET ADDRESS West Palm Beach, FL 33401 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 Change Addition ☐ Delete TITLE TITLE James, Elaine Johnson JAMES, ELAINE JOHNSON NAME NAME 1645 Palm Beach Lakes Blvd., Suite 1200 STREET ADDRESS 1645 PALM BCH LKS BLVD #1200 STREET ADDRESS CITY-ST-7IP West Palm Beach, FL 33401 CITY-ST-ZIP WEST PALM BCH. FL 33401 ПS TITLE AS ☐ Change X Addition ☐ Delete TITLE WHITE II., JOHN NAME Pachman, Mark A. NAME 1645 Palm Beach Lakes Blvd., Suite 1200 STREET ADDRESS STREET ADDRESS 1645 PALM BCH LAKES 1200 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BCH. FL West Palm Beach, FL 33401 DT TITLE ☐ Change · 🗔 Addition Delete TITLE LIOCE, DOMENICK MAME STREET ADDRESS 1645 PALM BCH LKS BLVD #1200 STREET ADDRESS CITY - ST - 71P CITY-ST-ZIP WEST PALM BCH FL 33401 DVP Change Addition Delete TITLE GERSON, GARY N NAME NAME 1645 PALM BCH LKS BLVD #1200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP W PALM BCH FL 33401 13. I hereby certify that the information supplied with this filling 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 for 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 fall other like empowered.