FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 353529

(1)

WILLIAM R. NASH, INC.

| Principal Place of Business Mailing Address | | | | | I SOOTOO ZAHAL OTKOO DAKL DAHL | TIRIO (ATT DIBIR OLDI) BIDIS OZOST EJBIR BIDIS 1801 |
|--|---|--|--------------------------|----------------------|---|---|
| 7861 N.W. 55TH ST. 7861 N.W. 55TH ST. MIAMI FL 33166 MIAMI FL 33166-4113 | | | | | | |
| | | | | | 3. Date Incorporated or Qu 10/08/1969 | alified 3a. Date of Last Report 05/01/1996 |
| 2. Principal F | lace of Business | 2a. Mailing Address | | | 4. FEI Number | Applied For |
| 21 26 | | | | | 59-1274711 | Not Applicable |
| Suite, Apr. #, etc. 22 | | Suite, Apt. #, etc. | 27 | | 5. Certificate of Status Desi | red S8.75 Additional Fee Required |
| City & Star 23 | е | City & State | | | Election Campaign Finar Trust Fund Contribution | ncing \$5.00 May Be Added to Fees |
| Zip 24] | Country 25 | Ζιp 29 | 30 | ntry | This corporation has liab Florida Statutes | ility for intangible tax under s. 199.032, |
| <u></u> | 9. Name and Address of Curren | | 100 | | 10. Name and Address of I | |
| NAS | SH, WILLIAM R. | | | B1 Name | | |
| 7816 NW 55TH ST. | | | | 82 Street Ade | dress (P.O. Box Number is Not A | ccentable) |
| MIAMI FL 33166 | | | | Out of Adi | aresa (r.o. box nemoor is not re | |
| | | | | 83 | | |
| | | | | 84 City | | 85 Zip Code |
| | | | | | | FL () |
| office or i | to the provisions of security but the State registered agent, or both, in the State im familiar with, and accept the obligation Suit to the major stone of registered agent. | of Florida Such change was itions of, Section 607 0505, F | authorize Iorida Stal | t by the corporates. | ation's board of directors. I hereb | or the purpose of changing its registered y accept the appointment as registered |
| 12. | OFFICERS AND | | 13. | | | O OFFICERS AND DIRECTORS IN 12 |
| 301(8 | VD | ☐ DELETE | 1.1 10 | 'LE | | Change Addition |
| NAME | NASH, WILLIAM R, JR | | 1.2 N | IME . | | |
| STREET ADDRESS | 6530 SW 9TH ST | | 1.3 \$1 | REET ADDRESS | | |
| CITY-ST ZIP | PEMBROKE PINES FL | | 1.4 CI | TY-ST-ZIP | , | |
| THIE | VD | DELETE | 2.1 11 | ILE | | Change Addition |
| NAMÉ | NASH, MICHAEL D | | 22 N | ME I | | |
| STREET AUDRESS | 7861 NW 55TH ST | | 238 | REET ADDRESS | | ļ |
| 011Y+\$1+Zir* | MIAMI FL | | 240 | TY-ST-ZIP | | |
| HU | VST | DELETE | 3 1 Ti | LE | | Change Addition |
| NAME | NASH, RUSSELL P | | 3.2 N | ME . | | |
| STREET ADDRESS | 20341 NW 2 ST | | 3.3 \$ | REET ADDRESS | | j |
| CHY+SI+7IP | PEMBROKE PINES FL | | 3.4. C | ITY-ST-ZIP | | |
| 7111.6 | VD | ☐ DELETE | 4.1 3) | I . | | Change Addition |
| NAME | NASH, BENJAMIN P | | 4. 2 N | AME | | |
| STREET ADDRESS | 10505 BERMUDA DR. | | 4.3 \$ | REET AODRESS | | |
| Cdn+ST-7IP | COOPER CITY FL | ~ | 4.4 C | TY-ST-ZIP | | |
| TITLE | PD | DELETE | 5.1 10 | ILE | | Change Addition |
| NAME | NASH, WILLIAM | | 5.2 N | ume | | |
| SPEEL ADORESS | 7440 TWIN SABAL DR | | 538 | REET ADDRESS | | } |
| CHY-SI-ZP | MAIMI LAKES FL | | | TY-ST-ZIP | | |
| THEF | V | DELETE | 6 1 Ti | | | Change Addition |
| NAME | YOULDEN, JOHN W. | | 6.2 N | l l | | |
| STREET ADDRESS | 15401 DOVER ST | | 6.3 \$ | REET ADDRESS | • | |
| CITY - ST-7IP | DAME FL | | 6.4 C | TY-ST-ZIP | | |

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:



FILED

Apr 16 1997 8:00am

Secretary of State