

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90195 038 ***150.00

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DOCUMENT # 353529

1. Corporation Name
WILLIAM R. NASH, INC.

Principal Place of Business
12981 N.W. 113TH COURT
MIAMI FL 33178

Mailing Address
12981 N.W. 113TH COURT
MIAMI FL 33178

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/08/1969

4. FEI Number

59-1274711

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

7. Trust Fund Contribution ☐

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

g. Name and Address of Current Registered Agent

NASH, WILLIAM R.
~~7816 NW 55TH ST.~~
~~MIAMI FL 33166~~

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

12981 NW 113TH COURT

83

84

City Miami

FL

85 Zip Code

33178

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME NASH, WILLIAM R, JR
STREET ADDRESS 6530 SW 9TH ST
CITY-ST-ZIP PEMBROKE PINES FL

TITLE ☐ DELETE

NAME NASH, MICHAEL D
STREET ADDRESS 7861 NW 55TH ST
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME NASH, RUSSELL P
STREET ADDRESS 20341 NW 2 ST
CITY-ST-ZIP PEMBROKE PINES FL

TITLE ☐ DELETE

NAME NASH, BENJAMIN P
STREET ADDRESS 10505 BERMUDA DR.
CITY-ST-ZIP COOPER CITY FL

TITLE ☐ DELETE

NAME NASH, WILLIAM
STREET ADDRESS 7440 TWIN SABAL DR
CITY-ST-ZIP MAAMI LAKES FL

TITLE ☐ DELETE

NAME YOULDEN, JOHN W.
STREET ADDRESS 15401 DOVER ST
CITY-ST-ZIP DAVIE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/99

Date

(305) 885-8105

Daytime Phone #

CR2E034 (11/98)