

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90034 011 ***150.00

0284106 AV

DOCUMENT # 353529

1. Entity 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**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

4. FEI Number **59-1274711**

Applied For
Not Applicable

5. Certificate of Status Desired - ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**NASH, BENJAMIN P
16283 SEBOVIA CIRCLE S
PEMBROKE PINES FL 33331**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

TITLE **EVD** ☐ Delete
NAME **NASH, WILLIAM R, JR**
STREET ADDRESS **701 SW 173RD LANE**
CITY-ST-ZIP **PEMBROKE PINES FL 33029**

TITLE **VD** ☐ Delete
NAME **NASH, MICHAEL D**
STREET ADDRESS **1630 NW 18TH AVE**
CITY-ST-ZIP **HOMESTEAD FL 33030**

TITLE **EVD** ☐ Delete
NAME **NASH, RUSSELL P**
STREET ADDRESS **13396 SW 41ST ST**
CITY-ST-ZIP **DAVE FL 33330**

TITLE **PD** ☐ Delete
NAME **NASH, BENJAMIN P**
STREET ADDRESS **16283 SEGOVIA CIR S**
CITY-ST-ZIP **PEMBROKE PINES FL 33331**

TITLE **ST** ☒ Delete
NAME **NASH, RYAN R**
STREET ADDRESS **1971 SW 81ST AVE**
CITY-ST-ZIP **DAVE FL 33324**

TITLE **VD** ☒ Delete
NAME **YOULDEN, JOHN W.**
STREET ADDRESS **15401 DOVER ST**
CITY-ST-ZIP **DAVE FL 33331**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VSTD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

RUSSELL P. NASH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)