

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 353529

FILED
Feb 14, 2008
Secretary of State

Entity Name: WILLIAM R. NASH, INC.

Current Principal Place of Business:

12981 N.W. 113TH COURT
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

12981 N.W. 113TH COURT
MIAMI, FL 33178

New Mailing Address:

FEI Number: 59-1274711

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NASH, RUSSELL
13396 SW 41 STREET
DAVIE, FL 33330 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: EVD () Delete
Name: NASH, WILLIAM R, JR,
Address: 701 SW 173RD LANE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VSTD () Delete
Name: NASH, MICHAEL D,
Address: 1630 NW 16TH AVE
City-St-Zip: HOMESTEAD, FL 33030

Title: EVD () Delete
Name: NASH, RYAN
Address: 13396 SW 41ST ST
City-St-Zip: DAVIE, FL 33330

Title: D () Delete
Name: NASH, BENJAMIN P,
Address: 16283 SEGOVIA CIR S
City-St-Zip: PEMBROKE PINES, FL 33331

Title: PD () Delete
Name: NASH, RUSSELL P
Address: 13396 SW 41 STREET
City-St-Zip: DAVIE, FL 33330

Title: VD () Delete
Name: HERMAN, LAWRENCE
Address: 55 GABLES BLVD.
City-St-Zip: WESTON, FL 33326

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
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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 exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUSSELL P NASH

P/D

02/14/2008

Electronic Signature of Signing Officer or Director

Date