

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2002 8:00 am
Secretary of State
 03-12-2002 90272 026 ***150.00

DOCUMENT # 512247

1. Entity Name
NUGENT & ASSOCIATES, INC.

Principal Place of Business

**170 10TH STREET NORTH
 NAPLES FL 34102
 US**

Mailing Address

**170 10TH STREET NORTH
 NAPLES FL 24102
 US**



2. Principal Place of Business

600 GOODLETTE FRANK RD.

3. Mailing Address

600 GOODLETTE FRANK RD

Suite, Apt. #, etc.

108

Suite, Apt. #, etc.

#108

City & State

NAPLES, FL

City & State

NAPLES, FL

Zip

34102

Country

USA

Zip

34102

Country

USA

4. FEI Number

59-1685852

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**BREEN, DOROTHY M
 3838 9TH STREET NORTH
 SUITE 405
 NAPLES FL 34103**

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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 **DVT** ☐ Delete
 NAME **RIVIERA, MARGARITA C**
 STREET ADDRESS **450 W BYBERRY RD TH28**
 CITY-ST-ZIP **PHILADELPHIA PA 19116**

TITLE **DPS** ☐ Delete
 NAME **NUGENT, ZENA A**
 STREET ADDRESS **184 VINTAGE CIR #101**
 CITY-ST-ZIP **NAPLES, FL 00000 34119**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DVT** ☒ Change ☐ Addition
 NAME **RIVIERA, MARGARITA C.**
 STREET ADDRESS **3719 W. CARLISLE ST.**
 CITY-ST-ZIP **PHILADELPHIA, PA 19140**

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

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

TITLE ☐ Change ☐ Addition
 NAME
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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:

Zena A. Nugent
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-28-02 941-262-7822

CR2E034 (9/01)