

**FOR PROFIT CORPORATION 2002
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91115 049 ***150.00

DOCUMENT # 577566

1. Entity Name
N & N ASSOCIATES, INC.

Certified Mail #
7001 1940 0006 5532 1325

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1789 DeSoto Road

Suite, Apt. #, etc.

3. Mailing Address

P. O. Box 3042

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Sarasota, FL

City & State

Sarasota, FL

4. FEI Number

59-1847178

Applied For

Not Applicable

Zip
34234

Country
US

Zip
34230

Country
US

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
DINSKY, NORMAN M.

Street Address (P.O. Box Number is Not Acceptable)
3908 Cocoanut Terr.

City
Bradenton

FL

Zip Code
34210

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

Norman M. Dinsky

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-29-02

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

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25**

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
PTD
NAME
Dinsky, Norman M.
STREET ADDRESS
3908 Cocoanut Terr.
CITY - ST - ZIP
Bradenton, FL 34234

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
VSD
NAME
Dinsky, Nancy M.
STREET ADDRESS
3908 Cocoanut Terr.
CITY - ST - ZIP
Bradenton, FL 34234

TITLE
NAME
STREET ADDRESS
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Norman M. Dinsky
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pres.

4-29-02

Date

Daytime Phone #

CR2E034B (12/01)