

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # F00000002196

1. Entity Name
NORTHLAND CORPORATION



03 SEP 30. PM 12:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
PO BOX 265
LA GRANGE KY 40031

Mailing Address
PO BOX 265
LA GRANGE KY 40031



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **61-0623284**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NENTWIG, RONALD
9000 SW 152ND ST., 106
MIAMI FL 33157

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
GUDMUNDSSON, ORN SR
2600 HWY 146 EAST
LA GRANGE KY 40031

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
100023416821
09/30/03 01006--022 **150.00

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
DAVIS, HILDA G
2600 HWY 146 EAST
LA GRANGE KY 40031

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/10/3 502-2221441

Date

Daytime Phone #

CR2E034 (4/03)

9/10/1

NORTHLAND CORPORATION

OFFICE AND YARD:
HIGHWAY 146 EAST
LAGRANGE, KY 40031

FACSIMILE NO. (502) 222-1445
LA GRANGE/LOUISVILLE



IMPORTED HARDWOODS

TELEPHONE: (502) 222-1441

MAILING ADDRESS: P.O. BOX 265



DOMESTIC HARDWOODS

September 18, 2003

LA GRANGE, KY 40031, U.S.A.

Florida Dept of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Ref. Number F00000002196

On September 9, our office sent our check for the filing fee, without the UBR report. Realizing the error, I went ahead and mailed the UBR separately. I now have your letter stating that because the check and report were not mailed together, the report was not filed.

I called today to be certain of the proper way to handle this correction. I am enclosing our check and the UBR copy that was returned to me.

I am also writing in accordance with your instructions, that we did not receive the prior notice which would advise me that the filing fee is initially due between January 1 and May 1 of each year.

Please accept our filing fee of \$150 and our UBR so that we can avoid the revocation.

Thank you.

A handwritten signature in cursive script, appearing to read "Gordon Williams".

Gordon Williams
Controller