## 2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

## Mar 06, 2002 8:00 am F01000006289 DOCUMENT # **Secretary of State** 1. Entity Name 03-06-2002 90088 037 \*\*\*150.00 N&S SERVICE COMPANY, INC. Principal Place of Business Mailing Address 212 CANCO ROAD P.O. BOX 1420 PORTLAND ME 04104 PORTLAND ME 04104 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 01-0457857 Not Applicable Country Zip\_\_\_\_\_ ■ Country -- Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) .1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TIT! F ☐ Change ☐ Addition NAME NAME NELSON, KENNETH M STREET ADDRESS 212 CANCO ROAD STREET ADDRESS CITY-ST-ZIP PORTLAND ME 04104 CITY-ST-ZIP TITLE TITLE ☐ Addition □ Delete ☐ Change VTD NAME NAME SMALL, DAVID L STREET ADDRESS 212 CANCO ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **PORTLAND ME 04104** ☐ Delete TITLE ☐ Change TITLE ☐ Addition NAME NAME NELSON, LEONARD M STREET ADDRESS STREET ADDRESS 212 CANCO ROAD CITY-ST-ZIP CITY-ST-ZIP PORTLAND ME 04104 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME NELSON, ANDREW J STREET ADDRESS STREET ADDRESS 212 CANCO ROAD CITY-ST-7IP CITY-ST-ZIP **PORTLAND ME 04104** ☐ Delete TITI F Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 eath; that I am an efficer 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