

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90011 017 *****61.25

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DOCUMENT # F96000005577

1. Entity Name

NATIONAL SASH & DOOR JOBBERS ASSOCIATION, INCORPORATED

Principal Place of Business

**10047 ROBERT TRENT JONES HWY
 NEW PORT RICHEY FL 34655**

Mailing Address

**10047 ROBERT TRENT JONES HWY
 NEW PORT RICHEY FL 34655**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

62-0366120

Applied For

Not Applicable

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

C.T. CORPORATION SYSTEM

**1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

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.

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 \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DT** ☐ Delete
 NAME **ADEN, JACK**
 STREET ADDRESS **20 MAINSAIL AVE**
 CITY-ST-ZIP **PETERSBURG VA 23803**

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

TITLE **D** ☐ Delete
 NAME **LORENZO, GEORGE**
 STREET ADDRESS **1300 N. GLENVIEW PL**
 CITY-ST-ZIP **MILWAUKEE WI 53213**

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

TITLE **V** ☒ Delete
 NAME **PALMER, MARK**
 STREET ADDRESS **10047 ROBERT TRENT JONES PKWY**
 CITY-ST-ZIP **NEW PORT RICHEY FL 34655**

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

TITLE **D** ☒ Delete
 NAME **BROMBERG, WALLY**
 STREET ADDRESS **2201 29TH AVE NO**
 CITY-ST-ZIP **BIRMINGHAM AL 35207**

TITLE ☐ Change ☒ Addition
 NAME **D Taylor, Ron**
 STREET ADDRESS **1766 Arden Lane**
 CITY-ST-ZIP **Bethlehem, PA 18015**

TITLE **D** ☐ Delete
 NAME **BRADBERRY, JOHN**
 STREET ADDRESS **11851 PLANO ROAD**
 CITY-ST-ZIP **DALLAS TX 75243**

TITLE ☒ Change ☐ Addition
 NAME **D/P Bradberry, John**
 STREET ADDRESS **4100 Chesapeake Drive**
 CITY-ST-ZIP **Charlotte, NC 28216**

TITLE **DC** ☐ Delete
 NAME **TODD, JOSEPH**
 STREET ADDRESS **4601 MALAT ST**
 CITY-ST-ZIP **OAKLAND CA 94601**

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS
 CITY-ST-ZIP

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 617, 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: *Jack Aden* **Jack Aden, Treasurer**

3/21/02

(727) 372-3665

CR2E037 (9/01)