

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mathan Secretary of State DIRECTOR OF CORPORATIONS

FILED Aug 26 1998 8:00am Secretary of State

DOCUMENT # K95953 MARGARET NASH CORPORATION

(1)



1674 FOXBROOK WAY FT. COLLINS CO 80526 US

C/O ASSOCIATED ACCOUNTING 2536 S. COLLEGE AVE. FT. COLLINS CO 80525 US

DO NOT WRITE IN THIS SPACE

- 3. Date Incorporated or Qualified: 06/15/1989
4. FEI Number: 65-0123561
5. Certificate of Status Debited: \$8.75 Additional Fee Incurred
6. Election Campaign Contribution Fund Contribution: \$5.00 May be Added to Fees
8. This corporation owes or has paid the current year's (for 1998) Personal Property Tax due June 30: [] Yes [] No
10. Name and Address of New Registered Agent

- 2. Previous Officers and Directors (21-24)
2a. Mailing Address (25-29)
2b. Name and Address of Current Registered Agent (30)

NASH, MARGARET A 3747 SPANISH PINE DR. SARASOTA FL 34238

81 Name: MARGARET A. NASH
82 Street Address (P.O. Box Number is Not Acceptable): 2779 WOODGATE LN #29
83 City: SARASOTA, FLORIDA 34239
84 City: SARASOTA FL 85 Zip Code: 34239

11. The undersigned hereby certifies that the information furnished herein is true and correct, and that the information is true and correct as of the date of filing of this report with the Secretary of State.

Margaret A. Nash (Signature)

MARGARET A. NASH, PRES.

7/21/98

- 12. OFFICERS AND DIRECTORS (1-12)
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (13-24)

14. I hereby certify that the information supplied with this filing is true and correct, and that the information is true and correct as of the date of filing of this report with the Secretary of State.

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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **K95953**
 1. Corporation Name
MARGARET NASH CORPORATION

(1)



Principal Place of Business
**1674 FOXBROOK WAY
 FT. COLLINS CO 80526
 US**

Mailing Address
**C/O ASSOCIATED ACCOUNTING
 2536 S. COLLEGE AVE.
 FT. COLLINS CO 80525
 US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt #, etc.
 22 City & State
 23 Zip Country
 24

2a. Mailing Address

26 Suite, Apt #, etc.
 27 City & State
 28 Zip Country
 29

3. Date Incorporated or Qualified

06/15/1989

4. FEI Number

65-0123561

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**NASH, MARGARET A
 3747 SPANISH PINE DR.
 SARASOTA FL 34238**

10. Name and Address of New Registered Agent

81 Name **MARGARET A. NASH**
 82 Street Address (P.O. Box Number is Not Acceptable) **2779 WOODGATE LN #29**
 83 **SARASOTA, FLORIDA 34239**
 84 City **SARASOTA** **FL** 85 Zip Code **34239**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

Margaret A. Nash

MARGARET A. NASH, PRES.

7/21/98

Signature of president or principal officer of corporation and filer, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	NASH, MARGARET A.	
STREET ADDRESS	1674 FOXBROOK WAY	
CITY-ST-ZIP	FT. COLLINS CO	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)