

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2002 8:00 am
Secretary of State

04-26-2002 90026 042 ***150.00

DOCUMENT # M79164

1. Entity Name
NAFZINGER & ASSOCIATES, INC.

Principal Place of Business

701 ENTERPRISE RD E

905

SAFETY HARBOR FL 34695-5342

US

Mailing Address

701 ENTERPRISE RD E

905

SAFETY HARBOR FL 34695-5342

US

2. Principal Place of Business

11 LITCHFORD ROAD

Suite, Apt. #, etc.

3. Mailing Address

11 LITCHFORD ROAD

Suite, Apt. #, etc.

City & State

CHAPEL HILL NC

City & State

CHAPEL HILL NC

Zip

27514

Country

USA

Zip

27514

Country

USA

4. FEI Number

59-2889802

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NAFZINGER, JAMES S.

C/O NAFZINGER & ASSOCIATES, INC

701 ENTERPRISE RD E STE 905

SAFETY HARBOR FL 34695-5342

7. Name and Address of New Registered Agent

Name

JAMES S. NAFZINGER

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

1400 TARPON WOODS BLVD, UNIT B1

City

PALM HARBOR

FL

Zip Code

34685

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 *James S. Nafzinger* **JAMES S. NAFZINGER**

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

(NOTE: Registered Agent signature required when reinstating)

4-12-02

DATE

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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 ☐ Delete
NAME **D**
STREET ADDRESS **NAFZINGER, JAMES S.**
CITY-ST-ZIP **4808 JEWEL TERRACE**
PALM HARBOR FL 34685

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **NAFZINGER, JUDITH H.**
CITY-ST-ZIP **4808 JEWELL TERRACE**
PALM HARBOR FL 34685

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **11 LITCHFORD ROAD**
CITY-ST-ZIP **CHAPEL HILL, NC 27514**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **11 LITCHFORD ROAD**
CITY-ST-ZIP **CHAPEL HILL, NC 27514**

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

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James S. Nafzinger **JAMES S. NAFZINGER**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-12-02

Daytime Phone #

919-960-8573

CR2E034 (9/01)