

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N18569

1. Entity Name

NATIONAL ORDER OF TRENCH RATS, INC.

Principal Place of Business

525.39 ST E
BRADENTON FL 34203
US

Mailing Address

P.O. BOX 20538
BRADENTON FL 34203
US

2. Principal Place of Business

1381 S.W. 28th AVE

Suite, Apt. #, etc.

3. Mailing Address

1381 S.W. 28th AVE

Suite, Apt. #, etc.

City & State

BOYNTON BCH FL

City & State

BOYNTON BCH FL

Zip

33426

Country

Wpb

Zip

33426

Country

Wpb

6. Name and Address of Current Registered Agent

ENGWILLER, JOHN D.
5627 39TH ST E.
BRADENTON FL 34203

4. FEI Number

65-0003196

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

JOHN D ENGWILLER

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

1381 S.W. 28th AVE

BOYNTON BCH FL 33426

City

FL

Zip Code

33426

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 name of registered agent and title

(NOTE: Registered Agent signature required when reinstating)

DATE

2-19-02

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

TITLE D ☐ Delete
NAME ENDWILLER, JOHN D
STREET ADDRESS 5627 39TH ST. E
CITY-ST-ZIP BRADENTON FL 34203

TITLE D ☐ Delete
NAME DILAURENZIO, JOHN J.
STREET ADDRESS P.O. BOX 86 N/A
CITY-ST-ZIP NAUGATUCK, CT

TITLE D ☐ Delete
NAME BAILEY, PAUL
STREET ADDRESS 324 RUTTER AVE
CITY-ST-ZIP KINGSTON PA 18704

TITLE D ☐ Delete
NAME BRZEZINSKI, WILLIAM
STREET ADDRESS 3412 PINON PEAK DRIVE
CITY-ST-ZIP LAS VEGAS NV 89115

TITLE D ☒ Delete
NAME VIGIL, SAM
STREET ADDRESS 13561 VALLEJO ST
CITY-ST-ZIP WESTMINSTER CO 80234

TITLE D ☐ Delete
NAME REED, VINCENT
STREET ADDRESS 6 ELMWOOD RD
CITY-ST-ZIP LYNNFIELD MA 09140

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1381 S.W. 28th AVE
CITY-ST-ZIP BOYNTON BCH FL 33426

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

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

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

TITLE D ☐ Change ☒ Addition
NAME FRANK CUMMINGS
STREET ADDRESS 717 WALTHAM STREET
CITY-ST-ZIP METAIRIE, LA 70001

TITLE ☐ Change ☐ Addition
NAME
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:

SIGNATURE REQUIRED Sec/Treas

2-19-02

561-740-7985

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)