

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N27351

1. Entity Name

AMERICAN SUBCONTRACTORS ASSOCIATION OF NORTHWEST

**FILED**  
**May 17, 2001 8:00 am**  
**Secretary of State**

05-17-2001 91306 036 \*\*\*\*61.25

000014



DO NOT WRITE IN THIS SPACE

Principal Place of Business <del>5880 NO PENSACOLA BLVD</del> <del>P.O. BOX 10710</del> PENSACOLA FL 32523 US	Mailing Address <del>5880 NO PENSACOLA BLVD</del> P.O. BOX 19115 PENSACOLA FL 32523 US
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2. Principal Place of Business 5580 N. Pensacola Blvd Suite, Apt. #, etc.	3. Mailing Address 5580 N. Pensacola Blvd Suite, Apt. #, etc.
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City & State Pensacola Florida	City & State Pensacola Florida
Zip 32505	Zip 32505
Country	Country

4. FEI Number 59-2911963	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  STROEHL, JAMIE <del>5880 NO PENSACOLA BLVD</del> PENSACOLA FL 32505
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 5580 N. Pensacola Blvd City FL Zip Code
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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. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, DON 1441 FAIRCHILD STREET PENSACOLA FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WATTERS, WOODY 3901 N PALAFOX STREET PENSACOLA FL 32505 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CROTTS, BILL 3605 N DAVIS HWY PENSACOLA FL 32503 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ATCHISON, MISSY 900 INDUSTRIAL CT PENSACOLA FL 32505 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HARRIS, PHIL 6665 CHUMUCKLA HWY DACE FL 32571 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRADLEY, JIMMY 3280 WEST SCOTT STREET PENSACOLA FL <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: W. Woody Watters **REQUIRED** 5-1-01

CR2E037 (10/00)