

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Mar 24, 2002 8:00 am
Secretary of State

03-24-2002 90021 018 ****61.25

DOCUMENT # N97000001937

1. Entity Name

EMERALD COAST BALLET, INC.

Principal Place of Business

Mailing Address

**4529 BAYBROOK DRIVE
PENSACOLA FL 32514****4529 BAYBROOK DRIVE
PENSACOLA FL 32514**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3451342

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**NADER, STEVE JR.
4529 BAYBROOK DRIVE
PENSACOLA FL 32514**

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 \$61.259. 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	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
<input type="checkbox"/> Delete	D	NADER, STEVE JR	4529 BAYBROOK DRIVE PENSACOLA FL 32514	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Delete	D	NADER, ANTHEA S JR	4529 BAYBROOK DRIVE PENSACOLA FL 32514	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Delete	D	NADER, LEON S SR	7839 MONTEGO DRIVE PENSACOLA FL 32506	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Delete				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Delete				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Delete				<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:

Steve Nader, JR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-2-2000 850-478-5191

CR2E037 (9/01)