

2000-UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000003149

1. Entity Name

NATIONAL ASSOCIATION OF CIVIL LAW NOTARIES, INC.

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90149 045 ****61.25

Principal Place of Business
1242 N. DUVAL ST.
TALLAHASSEE FL 32302

Mailing Address
1242 N. DUVAL ST.
TALLAHASSEE FL 32303-6115

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-355291

APPLIED FOR

Applied For
Not Applicable

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

BRYANT, BILL L JR
106 E COLLEGE AVE, SUITE 1200
TALLAHASSEE FL 32302

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 \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BRYANT, BILL L JR
106 E. COLLEGE AVE. STE 1200
TALLAHASSEE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☒ Addition
32301

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KOCOUREK, TODD G
1242 N. DUVALL ST.
TALLAHASSEE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☒ Addition
32303

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PENALVER, RAFAEL
1101 BRICKNELL AVE. STE. 1700
MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☒ Addition
1101 Brickell Ave.
33131

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CARLISLE, RUSSELL
415 SE 12TH ST.
FT. LAUDERDALE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☒ Addition
33316

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WILLING, DAVID
2837 SW 3RD AVE
MIAMI FL 33129 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☒ Addition
willig, David

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ROSENBERG, LEONARD
5200 BLUE LAGOON DR. STE. 600
MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☒ Addition
Rosenberg, Leonard
33126

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David S. Willig

Date

Daytime Phone #

4/24/2000 (800) 667-7755