

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000005762

1. Entity Name

TO THE NATIONS, INC.

Principal Place of Business

2160 CHINOOK TR  
MAITLAND FL 32751

Mailing Address

2160 CHINOOK TR  
MAITLAND FL 32751

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

59-3540014

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

BLYTHE, RICK H  
2160 CHINOOK TR  
MAITLAND FL 32751

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 PD ☐ Delete  
NAME BLYTHE, RICH H  
STREET ADDRESS 2160 CHINOOK TR  
CITY-ST-ZIP MAITLAND FL 32751

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

TITLE TD ☐ Delete  
NAME PRICE, STEVE  
STREET ADDRESS 1420 EDGEWATER DR.  
CITY-ST-ZIP ORLANDO FL 32804

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

TITLE TD ☒ Delete  
NAME BLYTHE, LES D  
STREET ADDRESS 1319 GANG PLANK DR  
CITY-ST-ZIP VALRICO FL 33594

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

TITLE D ☐ Delete  
NAME BRYSON, TED  
STREET ADDRESS 1800 FORREST RD  
CITY-ST-ZIP WINTER PARK FL 32789

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

TITLE D ☐ Delete  
NAME HUCKLEBERRY, DERRICK  
STREET ADDRESS PO BOX 940489  
CITY-ST-ZIP MAITLAND FL 32794-0489

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

TITLE SD ☐ Delete  
NAME HARRISON, RON  
STREET ADDRESS 3750 PLANTERS CREEK CR. W.  
CITY-ST-ZIP JACKSONVILLE FL 32224

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 reports 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 an other like empowered.

SIGNATURE:

*Rick H. Blythe*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Apr 20, 2001 8:00 am  
Secretary of State

04-20-2001 90189 039 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)