

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000003177

FILED  
Jan 11, 2002 8:00 AM  
Secretary of State

**Entity Name:** SOVEREIGN NATIONS CULTURAL PRESERVATION CENTER, INC.

**Current Principal Place of Business:**

134 PADDINGTON ROAD  
VENICE, FL 342934116

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2124  
VENICE, FL 34285

**New Mailing Address:**

3220 MAPLE DRIVE  
CLOQUET, MN 55720

**FEI Number:** 59-3567690

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DIAMOND, MARC  
134 PADDINGTON ROAD  
VENICE, FL 342934116

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: O ( ) Delete  
Name: DIAMOND, MARC  
Address: 134 PADDINGTON RD  
City-St-Zip: VENICE, FL 34293

Title: D ( ) Delete  
Name: SILLMAN, GINA  
Address: 134 PADDINGTON ROAD  
City-St-Zip: VENICE, FL 34293

Title: D ( ) Delete  
Name: SACCACIO, FRANK  
Address: 236 SHARRON DR  
City-St-Zip: ALTOMONT SPRINGS, FL 32710

Title: D ( ) Delete  
Name: TARASHUK, JOHN  
Address: 166 VENICE E BLVD  
City-St-Zip: VENICE, FL 34293

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: NAHGAHNUB, KIM L  
Address: 3220 MAPLE DRIVE  
City-St-Zip: CLOQUET, MN 55720

Title: D (X) Change ( ) Addition  
Name: NAHGHNUB, CHARLES  
Address: 2990 MAPLE DRIVE  
City-St-Zip: CLOQUET, MN 55720

Title: D (X) Change ( ) Addition  
Name: NAHGAHNUB, ESTHER  
Address: P.O.BOX 44  
City-St-Zip: SAWYER, MN 55780

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARC DIAMOND

OWNE

01/11/2002

Electronic Signature of Signing Officer or Director

Date