

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2001 8:00 am
Secretary of State

08-21-2001 90030 004 ***150.00

DOCUMENT # P00000048060

1. Entity Name

NEXT GENERATION TRAINING, INC.

Principal Place of Business

**1804 NEBRASKA AVE
 PALM HARBOR FL 34683**

Mailing Address

**1804 NEBRASKA AVE
 PALM HARBOR FL 34683**

2. Principal Place of Business

1804 Nebraska Ave.

3. Mailing Address

1804 Nebraska Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Palm Harbor, FL

City & State

Palm Harbor, FL

4. FEI Number

59-3648234

Applied For

Not Applicable

Zip

34683

Country

USA

Zip

34683

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**SHURDEN, WALTER B
 611 DRUID RD E, SUITE 512
 CLEARWATER FL**

7. Name and Address of New Registered Agent

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 of officer, director, or registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/14/2001

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$550.00
 After September 12, 2001 Fee will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **WAGNER, ANITA D**
 STREET ADDRESS **1804 NEBRASKA AVE**
 CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE **D** ☐ Delete
 NAME **WAGNER, FRANK S**
 STREET ADDRESS **1804 NEBRASKA AVE**
 CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ANITA D WAGNER
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/14/2001
 Date

727-786-6017
 Daytime Phone #

0101365 AV

CR2E034 (5/01)

Attachment
DH# N08186
911895

Next Generation Training, Inc.
1804 Nebraska Ave.
Palm Harbor, FL 34683

August 14, 2001

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To whom it may concern,

I am writing in regards to request a waiver for the \$400.00 late filing fee.
We did not receive the original mailed UBR. I called your office and was
Advised to send a waiver letter and mail a check for \$150.00.
Please let me know if there is anything else I must do.

Thank you,

Anita Wagner
Next Generation Training, Inc.