

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 20, 2001 8:00 am**  
**Secretary of State**

07-20-2001 90003 016 \*\*\*558.75

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**DOCUMENT # P00000052103**

1. Entity Name

**NIPPER MANAGEMENT SOLUTIONS, INC.**

Principal Place of Business

216 BAY ARBOR BLVD  
 OLDSMAR FL 34677

Mailing Address

216 BAY ARBOR BLVD  
 OLDSMAR FL 34677

2. Principal Place of Business

3780 Sweepstake Ct

3. Mailing Address

3780 Sweepstake Court

Suite, Apt. #, etc.

#2207

Suite, Apt. #, etc.

#2207

City & State

Palm Harbor, FL

City & State

Palm Harbor, FL

4. FEI Number

59-3656810

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

WILSON, CARL D

216 BAY ARBOR BLVD  
 OLDSMAR FL 34677

*New address*

7. Name and Address of New Registered Agent

Name *Carl D. Wilson*

Street Address (P.O. Box Number is Not Acceptable)

3780 Sweepstake Court

#2207

City *Palm Harbor*

FL

Zip Code *34684*

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

*Carl D. Wilson*

*VP/General Manager Carl D. Wilson*

*7/15/01*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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 *Vice President/General Manager*  
 NAME *Carl D. Wilson*  
 STREET ADDRESS *216 Bay Arbor Blvd*  
 CITY-ST-ZIP *Oldsmar, FL 34677*

TITLE  
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE *Vice President/General Manager*  
 NAME *Carl D. Wilson*  
 STREET ADDRESS *3780 Sweepstake Court #2207*  
 CITY-ST-ZIP *Palm Harbor, Florida 34684* ☒ Change ☐ Addition

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

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

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 CITY-ST-ZIP ☐ Change ☐ Addition

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

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:

*Carl D. Wilson*

*7/15/01*

*727-492-5183*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)