

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2001 8:00 am
Secretary of State

03-14-2001 90008 023 ***150.00

DOCUMENT # P00000075930

1. Entity Name

BAJL NELSON, INC.

Principal Place of Business

Mailing Address

~~3723 72ND AVE EAST~~
SARASOTA FL 34243

~~3723 72ND AVE EAST~~
SARASOTA FL 34243

2. Principal Place of Business

7207 41st Court E
 Suite, Apt. #, etc.

3. Mailing Address

7207 41st Court E
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Sarasota FL

City & State

Sarasota FL

FBI Number

65-1025553

Applied For

☐ Not Applicable

Zip

34243

Country

Sarasota

Zip

34243

Country

Sarasota

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NELSON, JAMIE L
3723 72ND AVE. EAST
SARASOTA FL 34243

7. Name and Address of New Registered Agent

Name **Jamie Nelson**
 Street Address (P.O. Box Number Not Acceptable) **7207 41st Court E**
 City **Sarasota** FL Zip Code **34243**

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

Jamie Nelson

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

(NOTE: Registered Agent signature required when reinstating)

2/14/01

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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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	NELSON, JAMIE L	
STREET ADDRESS	3723 72ND AVE EAST 7207 41st Court E	
CITY-ST-ZIP	SARASOTA FL 34243	
TITLE	D	☐ Delete
NAME	NELSON, BRIAN A	
STREET ADDRESS	3723 72ND AVE EAST 7207 41st Court E	
CITY-ST-ZIP	SARASOTA FL 34243	
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		
STREET ADDRESS		
CITY-ST-ZIP		
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:

Jamie Nelson **PRES.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/01

Date

Daytime Phone #

CR2E034 (10/00)