

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 10, 2001 8:00 am**  
**Secretary of State**

05-10-2001 90174 025 \*\*\*150.00

DOCUMENT # P 00000115816

1. Entity Name

BEKKER, NYGARD & WEST, INC.

Principal Place of Business

Mailing Address

4508 Inverrary Blvd.,  
 Lauderhill, FL. 33319

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1062409

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

DO NOT WRITE IN THIS SPACE

00064227

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Seidensticker & San Filippo, LLP  
 1100 Fifth Ave., Ste. 405  
 Naples, FL. 34102

Name

Joseph H. West

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

437 Lakeview Drive, Bldg.88 #103

City

Weston,

FL

Zip Code  
 33326

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

*Joseph H. West*

Joseph H. West

April 23, 2001

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME PD Joseph H. West ☐ Delete  
 STREET ADDRESS 437 Lakeview Dr. #88-103  
 CITY-ST-ZIP Weston, FL. 33326

TITLE NAME PD Joseph H. West ☐ Change ☐ Addition  
 STREET ADDRESS 437 Lakeview Dr. #88-103  
 CITY-ST-ZIP Weston, FL. 33326

TITLE NAME VT Reynoldi Nygard ☐ Delete  
 STREET ADDRESS 7511 N.W. 9th St.,  
 CITY-ST-ZIP Plantation, FL. 33317

TITLE NAME VD Reynoldi Nygard ☐ Change ☐ Addition  
 STREET ADDRESS 7511 N.W. 9th St.,  
 CITY-ST-ZIP Plantation, FL. 33317

TITLE NAME VS Nigel A. Bekker ☒ Delete  
 STREET ADDRESS 754 S.E. 19th Ave. #124  
 CITY-ST-ZIP Deerfield Beach, FL. 33441

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

TITLE NAME ☐ Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE NAME ☐ Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE NAME ☐ Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
 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:

*Joseph H. West*

Joseph H. West

4-23-01

(954) 747-8939

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2001 (11/00)