

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2002 8:00 am
Secretary of State

07-16-2002 90373 015 ***150.00

DOCUMENT # P01000084071

1. Entity Name

NANLIN ENTERPRISES, INC.

Principal Place of Business

**6005 GULF DRIVE #216
 HOLMES BEACH FL 34217**

Mailing Address

**3395 NIBLICK COURT
 ALPHARETTA GA 30022**

2. Principal Place of Business

3. Mailing Address

**6005 GULF DRIVE
 # 216**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

HOLMES BEACH FL

Zip

Country

Zip

Country

34217

USA

4. FEI Number

65-1154545

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAY, RICHARD B

**61028 26TH ST W STE 2
 BRADENTON FL 34208**

Name

RAY, RICHARD B

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

61028 26TH ST W

SUITE 2

City

BRADENTON

FL

Zip Code

34207

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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 13, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HECKLINSKI, MIKE 3395 NIBLICK CT ALPHARETTA GA 30022	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HECKLINSKI, NANCY 3395 NIBLICK CT ALPHARETTA GA 30022	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RISNER, DAVE 3395 NIBLICK CT ALPHARETTA GA 30022	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RISNER, LINDA 3395 NIBLICK CT ALPHARETTA GA 30022	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HECKLINSKI, MIKE 6005 GULF DR. #216 HOLMES BEACH, FL 34217	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HECKLINSKI, NANCY 6005 GULF DR. #216 HOLMES BEACH, FL 34217	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RISNER, DAVE 6005 GULF DR. #216 HOLMES BEACH, FL 34217	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RISNER, LINDA 6005 GULF DR. #216 HOLMES BEACH, FL 34217	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

REMIKE HECKLINSKI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/11/02

Date

Daytime Phone #

941-778-4635

CR2E034 (4/02)

Attachment

7/11/02

970436

To Whom it May Concern:

#PO1000084071

Please excuse the inconvenience — we did not receive this UBR until July '02 — due to incorrect address for the Registered agent (address corrected on Form).

I am submitting form with corrections and check for \$150.00

Thank you for your help in this matter.

