

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2002 8:00 am
Secretary of State

07-17-2002 90135 007 ***150.00

DOCUMENT # P01000101424

1. Entity Name
NATIONAL LAW ENFORCEMENT DISTRIBUTORS, INC.

Principal Place of Business

**8230 STATE ROAD 84
 DAVIE FL 33324**

Mailing Address

**8230 STATE ROAD 84
 DAVIE FL 33324**

00129944



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

8238 West State Road 84

8238 West State Road 84

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1150058

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

GASS, DANIEL G

10001 NW 50TH STREET, SUITE 204

SUNRISE FL 33351

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. 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 **D** ☐ Delete
 NAME **DILLARD, JILL**
 STREET ADDRESS **8230 STATE ROAD 84**
 CITY-ST-ZIP **DAVIE FL 33324**

TITLE ☐ Change ☐ Addition

TITLE **P** ☐ Delete
 NAME **DILLARD, JEFF**
 STREET ADDRESS **8230 STATE ROAD 84**
 CITY-ST-ZIP **DAVIE FL 33324**

National Law Enforcement Distributors, Inc.

8238 West State Road 84
Davie, Florida 33324

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ 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:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/3/02 (954) 915-8226

CR2E034 (4/02)

Bank of America

Bank of America, N.A.
Regional Center
P.O. Box 31019
Tampa, FL 33631-3019

Attachment
#PO1000101424
60129944

Telephone Banking: 1.800.299.2265

Date of Notice: 07/05/02

Account: Business Economy Checking
Account Number: 0036 7366 5400

Stop Payment Notice.

At your request, we have placed a stop payment on the check (item) described below. Please make sure that the information you have provided to us about this item is correct. To cancel your stop payment request or change any of the information noted below, please call us toll free at the number listed above. In addition, if there is a fee associated with your stop payment order, please remember to deduct it from your account balance.

Stop payment order effective:	07/05/02	Amount:	\$150.00
Check number/range:	0000001179	Stop payment fee:	\$30.00
Payee: THE DIVISION OF CORPORATIONS		Date of check:	01/21/02
Reason for stop payment: LOST			

Stop Payment Terms and Conditions.

1. You can withdraw your stop payment order at any time by writing to us at the address listed above. Depending on the nature of your stop payment order, there may be a fee charged to your account for each stop payment order and for each renewal.
2. Because checks (items) are searched by computer, please make sure that the check (item) number, exact amount and account number you've given us are correct. We will not be liable for failing to stop payment on the item if any of this information is incorrect or if we did not have a reasonable amount of time to act upon your stop payment order. **PLEASE NOTE:** If a check (item) you have requested a stop payment on has been presented to the bank for payment, or deposited to a bank account via a teller, ATM or night depository before or on the same business day that you placed the stop payment order, we may not be able to stop payment on this item. If this is the case, we cannot be held liable for failing to honor your stop payment.
3. Your stop payment order will be effective for at least six months, and may be renewed in writing. If you want to renew the stop payment order, please be sure to write to us before the expiration date. If we don't hear from you regarding extending the stop payment order, we will not be liable for paying the check (item) if it is presented to us after this six-month period.
4. By requesting that we stop payment on the check (item), you agree to indemnify and hold us harmless for any loss, claims, damage or costs, including reasonable attorneys' fees, that we incur as a result of honoring your request. Our liability for paying an item subject to a proper and timely stop payment order is limited to the actual loss suffered.

Attachment
D# P01000101424
B0129944

1179			
56605	DATE	1/21/02	
TO Div. of Corporations			
Business Report Filing			
FOR			
		TOTAL	
		THIS CHECK	150 00
		OTHER TRANS. +/-	
TAX DEDUCTIBLE <input type="checkbox"/>		BALANCE	

Copy of
Check Register



National Law Enforcement Distributors, Inc.

Attachment
D# P01000101 424
B0129944

July 5, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 6327
Tallahassee, FL. 32314

Re: FEI #65-1150058

To Whom It May Concern:

I recently received a notice from your office stating that I owe \$550.00 for past due business report filings. On January 21, 2002 I issued check #1179 in the Amount of \$150.00 to the Division of Corporations for this uniform business report filing. Upon receipt of your letter, I contacted my bank and was told that the check had not cleared. Thus, I stopped payment on this check, and I have enclosed a copy of the stop payment order. I have also enclosed a copy of the entry from my check register indicating that this check was issued to your department on January 21st, 2002.

I am requesting that the late filing fee be waived due to the fact that the check was originally issued in a timely manner, but unfortunately was lost after being mailed.

I am enclosing a check in the amount of \$150.00 to replace the lost Check #1179. Please feel free to contact me should you need any additional information. I can be reached at (954) 915-8226.

Thank you for your consideration in this matter.

Sincerely,

Jill Dillard
National Law Enforcement Distributors, Inc.