

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000006695

FILED
Jan 15, 2003
Secretary of State

Entity Name: NATIONS RESOURCES, INC.

Current Principal Place of Business:

13920 MAGNOLIA GLEN CIR
ORLANDO, FL 32828

New Principal Place of Business:

1895 CYCLONE ST NW
PALM BAY, FL 32907

Current Mailing Address:

13920 MAGNOLIA GLEN CIR
ORLANDO, FL 32828

New Mailing Address:

1895 CYCLONE ST. NW
PALM BAY, FL 32907

FEI Number: 94-3430648

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLAKMAN, BERNARD
13920 MAGNOLIA GLEN CIR
ORLANDO, FL 32828 US

Name and Address of New Registered Agent:

SLAKMAN, BERNARD
1895 CYCLONE ST NW
PALM BAY, FL 32907 US

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:

01/15/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP (X) Delete
Name: SLAKMAN, SANDRA
Address: 13920 MAGNOLIA GLEN CIR
City-St-Zip: ORLANDO, FL 32828

Title: DCEO () Delete
Name: SLAKMAN, BERNARD
Address: 13920 MAGNOLIA GLEN CIR
City-St-Zip: ORLANDO, FL 32828

Title: V () Delete
Name: SLAKMAN, RICHARD
Address: 13920 MAGNOLIA GLEN CIR
City-St-Zip: ORLANDO, FL 32828

Title: ST () Delete
Name: NESTER, JOHN
Address: 13920 MAGNOLIA GLEN CIR
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DCEO (X) Change () Addition
Name: SLAKMAN, BERNARD
Address: 1895 CYCLONE ST NW
City-St-Zip: PALM BAY, FL 32907

Title: V (X) Change () Addition
Name: SLAKMAN, RICHARD
Address: 1895 CYCLONE ST. NW
City-St-Zip: PALM BAY, FL 32907

Title: ST (X) Change () Addition
Name: NESTER, JOHN
Address: 1895 CYCLONE ST NW
City-St-Zip: PALM BAY, FL 32907

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BERNARD SLAKMAN

DCEO

01/15/2003

Electronic Signature of Signing Officer or Director

Date