

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 14 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P92000011987 (4)

1. Corporation Name

NATIONS TRUST, INC.



Principal Place of Business

250 VALENCIA AVE.  
CORAL GABLES FL 33134

Mailing Address

250 VALENCIA AVE.  
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

12/15/1992

4. FEI Number

65-0470570

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MILLER, GEORGE D  
250 VALENCIA AVENUE  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

DPT  
GEORGE D MILLER  
250 VALENCIA AVE  
CORAL GABLES FL

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

V  
HENNESSY, DAVID C  
22481 PLEASANT PARK ROAD  
CONIFER CO 80433

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

VS  
JOEL S BERKOWITZ  
2115 KNAAB DRIVE  
BOZEMAN MT 59715

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

A  
LYNDA MAHONEY  
4815 S PINE ROAD  
EVERGREEN CO 80439

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

V  
COOLEY, WILLIAM O  
10836 PLEASANT PARK ROAD  
POTOMAC MD 20854

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

A  
SIMPSON, ANNA M  
850 HANGMANS ROAD  
BAILEY CO

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Anna M. Simpson, A Sec.

4/6/98

(303) 697-8400

CR2E034 (10/97)