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2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000021579

NATURE COAST ELECTRIC, INC.

Principal Place of Business

1454 NW 22ND ST CRYSTAL RIVER FL 34428 Mailing Address

1454 NW 22ND ST CRYSTAL RIVER FL 34428

2. Principal Place of Business 3. Mailing Address

FILED Jun 20, 2001 8:00 am Secretary of State

06-20-2001 90125 010 ***550.00

C0071991



Suite, Apt. #, et	C.	Suite, Apt. #, et	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State		City & State			4. FEI Number 59-3367010	Applied For Not Applicable
Zip	Country	Zip	Country		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			
YANT, JERRY D 1454 NW 22ND ST CRYSTAL RIVER FL 34428				Name Street Address (P.O. Box Number is Not Acceptable)		
				City		Zip Code
3. The above nam	ed entity submits this statemen	nt for the purpose of chan	nging its register	ed office or regi	stered agent, or both, in the State of Florida.	
SIGNATURE	ture, typed or printed name of registered a	gent and litle if applicable.	(NOTE: Registere	ed Agent signature req	uired when reinstating) DA	TE

FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible

After MAY 1, 2001 Fee will be \$550.00

Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Tax filing requirement and elects to do so (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. DP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME YANT, JERRY D NAME STREET ADDRESS STREET ADDRESS 1454 NW 22ND ST CITY-ST-ZIP CITY-ST-ZIP CRYSTAL RIVER FL ☐ Delete TITLE TITLE ☐ Change Addition NAME YANT, ELIZABETH A. NAME STREET ADDRESS STREET ADDRESS 1454 N.W. 22ND STREET CITY-ST-ZIP CITY-ST-ZIP CRYSTAL RIVER FL 34428 ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI E ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE ☐ Addition TITLE Change NAME NAME STREET ADDRESS 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.

CR2E034 (10/00)