

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90063 004 ***150.00

DOCUMENT # P97000010043

1. Entity Name
NACOR OF NAPLES, INC.

Principal Place of Business

**2634 SAILORS WAY
 NAPLES FL 34109**

Mailing Address

**2634 SAILORS WAY
 NAPLES FL 34109**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

2375 TAMiami TRAIL North

206 B

NAPLES, FL

34103

Collier



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3434967**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**KNEZEVICH, NICK
 2634 SAILORS WAY
 NAPLES FL 34109**

7. Name and Address of New Registered Agent

Name **NICK KNEZEVICH**

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

2375 TAMiami TRAIL North #206B

City **NAPLES**

FL

Zip Code
34103

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.

SIGNATURE **NICK KNEZEVICH**

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

(NOTE: Registered Agent signature required when reinstating)

4/25/01
 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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

TITLE **PSTD**
 NAME **KNEZEVICH, NICK**
 STREET ADDRESS **2634 SAILORS WAY**
 CITY-ST-ZIP **NAPLES FL 34109**

☐ Delete

TITLE **D**
 NAME **BUCKLEY, THOMAS**
 STREET ADDRESS **7501 N AIRPORT RD**
 CITY-ST-ZIP **NAPLES FL 34105**

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **KNEZEVICH, NICK**
 NAME **2375 TAMiami TRAIL N. #206B**
 STREET ADDRESS **NAPLES, FL 34103**

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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 STREET ADDRESS
 CITY-ST-ZIP

☐ 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:

NICK KNEZEVICH
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/01 941-643-0049

CR2E034 (10/00)