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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **P97000092060**

N.A.M., INC.

## Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90066 020 \*\*\*150.00



Principal Place of Business Mailing Address 10404 BRADEN RUN 10404 BRADEN RUN **BRADENTON FL 34202-1745 BRADENTON FL 34202-1745** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/17/1997 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 5406 Fruitville Rd. 65-0794914 Not Applicable \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing П Trust Fund Contribution Added to Fees 28 Country 8. This corporation owes the current year Intangible Zip □No 30 Personal Property Tax. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 SMALLWOOD, ROBERT T II Street Address (P.O. Box Number is Not Acceptable) 1715 STICKNEY POINT RD SARASOTA FL 34231 83 Zip Code 84 City 85 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Addition [] DELETE ☐ Change 1.1 TITLE TITLE MACE, RICHARD H JR 12 NAME NAME 10404 BRADEN RUN 1.3 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34202-1745** 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 2.1 TITLE TITLE MACE, JONI M 2.2 NAME NAME 10404 BRADEN RUN 2.3 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34202-1745** 2.4 CiTY-ST-ZiP CITY-ST-ZIP ☐ Addition ☐ DELETÉ 31 TM E ☐ Change TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF DELETE ☐ Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition 6.1 TITLE ☐ DELETE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 Plack 13 if shaped, are not executed 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, with all other like empowered

SIGNATURE:

(11/98) **CR2E034**