

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90118 027 ***158.75

0574147

DOCUMENT # P98000039422

1. Entity Name

THE HILLWOOD GROUP, INC.

Principal Place of Business

**9141 SOUTHERN ORCHARD ROAD
 DAVIE FL 33328**

Mailing Address

**9141 SOUTHERN ORCHARD ROAD
 DAVIE FL 33328**

2. Principal Place of Business

3 Andrew Drive

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lawrenceville, NJ

City & State

Same

Zip

08648

Country

USA

Zip

Same

Country

USA

4. FEI Number

65-0834459

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**LEITER, STEVEN J
 BARNETT BANK BUILDING SUITE 1010
 ONE EAST BROWARD BLVD.
 FORT LAUDERDALE FL 33301**

7. Name and Address of New Registered Agent

Name

Leiter, Steven J.

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

506 SE 8th St.

City

Ft. Lauderdale,

FL

Zip Code
33316

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

Brian Nugent

Brian Nugent, VP

1/21/01

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

(NOTE: Registered Agent signature required when reinstating)

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	D	<input type="checkbox"/> Delete
NAME	NUGENT, BRIAN	
STREET ADDRESS	9141 SOUTHERN ORCHARD ROAD	
CITY-ST-ZIP	DAVIE FL 33328	
TITLE	D	<input type="checkbox"/> Delete
NAME	NUGENT, CAROL	
STREET ADDRESS	9141 SOUTHERN ORCHARD ROAD	
CITY-ST-ZIP	DAVIE FL 33328	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	
NAME	3 Andrew Dr.
STREET ADDRESS	Lawrenceville, NJ 08648
CITY-ST-ZIP	08648
TITLE	
NAME	3 Andrew Dr.
STREET ADDRESS	Lawrenceville, NJ 08648
CITY-ST-ZIP	08648
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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.

SIGNATURE:

Brian Nugent

Brian Nugent, VP

1/21/01

609-895-9518

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)