

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90057 023 ***150.00

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1. Entity Name

NATIONAL FEE FOR SERVICE, INC.



Principal Place of Business

200 SOLANA RD.
PONTE VEDRA BEACH FL 32082

Mailing Address

P O BOX 757
PONTE VEDRA BEACH FL 32004

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3554347

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



MOORE

CR2E034 (11/03)

6. Name and Address of Current Registered Agent

BANYAS, WAINE
615 A1A N.
SUITE 102
PONTE VEDRA BEACH FL 33082

7. Name and Address of New Registered Agent

Name

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

200 SOLANA ROAD

City

Ponte Vedra Beach

FL

Zip Code

32082

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PSTD ☐ Delete
NAME BANYAS, WAYNE
STREET ADDRESS 615 A1A NORTH
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE VP ☐ Delete
NAME GERSONS, RICHARD D
STREET ADDRESS 615 A1A NORTH
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE D ☐ Delete
NAME STEWART, DOTTIE A.M.B.A.
STREET ADDRESS 615 A1A NORTH
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 200 SOLANA ROAD
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 200 SOLANA ROAD
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP SAME ABOVE

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Waine Banyas Waine Banyas

2-4-04 904-273-5774

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #