

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000010991

FILED  
Apr 27, 2002 8:00 AM  
Secretary of State

**Entity Name:** PHOENIX INSTALLATIONS, INC.

**Current Principal Place of Business:**

585 RIDGELINE RUN  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

585 RIDGELINE RUN  
LONGWOOD, FL 32750

**New Mailing Address:**

**FEI Number:** 59-3572287

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NADIN, BARRIE  
585 RIDGELINE RUN  
LONGWOOD, FL 32750

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).**

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PSTD ( ) Delete  
**Name:** NADIN, BARRIE  
**Address:** 585 RIDGELINE RUN  
**City-St-Zip:** LONGWOOD, FL 32750

**Title:** VD ( ) Delete  
**Name:** NADIN, BRIAN  
**Address:** 114 SOUTH ULYSSES DR  
**City-St-Zip:** APOKA, FL 32703

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** VD (X) Change ( ) Addition  
**Name:** DAVIDSON, SANDRA S  
**Address:** 585 RIDGELINE RUN  
**City-St-Zip:** LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** BARRIE NADIN

PSTD

04/27/2002

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date