2002 Uniform Business Report (UBR)

SIGNATURE: Comendo MExicl

Mar 18, 2002 8:00 am P99000051622 DOCUMENT # **Secretary of State** 1. Entity Name 03-18-2002 90186 011 ***150.00 AMANDA MCNISH & COMPANY, INC. Mailing Address Principal Place of Business 7033 US HWY. 301 SOUTH 7033 US HWY, 301 SOUTH RIVERVIEW FL 33569 RIVERVIEW FL 33569 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3584959 Not Applicable Country Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCNISH, AMANDA Street Address (P.O. Box Number is Not Acceptable) 7201 ALAFIA DR RIVERVIEW FL 33569 City Zip Code 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 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. (9/01) ☐ Addition TITLE TITLE Delete MCNISH, AMANDA G NAME MANISH, AMANDA G. NAME CR2E034 STREET ADDRESS 7201 ALAFIA DR. STREET ADDRESS 7201 ALAFIA DRIVE RIVERVIEW FL 33569 CITY-ST-ZIP CITY-ST-ZIP RIVERVIEW, FL 33569 ☐ Delete TITLE Addition TITLE MCNISH, BUDD A. MCNISH, BUDD A NAME NAME 7201 ALAFIA DRIVE STREET ADDRESS STREET ADDRESS 7201 ALAFIA DR. RIVERVIEW, FL.33569 CITY-ST-ZIP CITY-ST-ZIP CIVERVIEW FL 33569 ☐ Delete TITLE ☐ Change Addition TITLE McNISH, Amy Mi Mi 38-D TALWOOD CIRCLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRANDON, FL 33510 ☐ Change **X**Addition TITLE ☐ Delete TITLE MCNISH, STUART J. NAME NAME 1201 ALAFIA DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KIVERVIEW, EL 33569 ☐ Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.