

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11477

FILED
Apr 18, 2008
Secretary of State

Entity Name: NSA/CENTRAL FLORIDA, INC.

Current Principal Place of Business:

10317 LAKE CARROLL WAY
TAMPA, FL 33618 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 273228
TAMPA, FL 336883228 US

New Mailing Address:

FEI Number: 74-2422644 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MONTGOMERY, NANCY D
10317 LAKE CARROLL WAY
TAMPA, FL 33618 US

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

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: KROSKY, CINDY
Address: PO BOX 651119
City-St-Zip: VERO BEACH, FL 32965

Title: VP () Delete
Name: GEROUX, SANDY
Address: 3760 MANTEO CIRCLE
City-St-Zip: ORLANDO, FL 32837

Title: PELC () Delete
Name: TIMMONS, DAVE
Address: PO BOX 340025
City-St-Zip: TAMPA, FL 33654

Title: PP () Delete
Name: CUTTING, DONNA
Address: PO BOX 76461
City-St-Zip: ST PETERSBURG, FL 33734

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GEROUX, SANDY
Address: 3760 MANTEO CIRCLE
City-St-Zip: ORLANDO, FL 32837

Title: VP (X) Change () Addition
Name: FRANK, TRUNZO
Address: 2302 VILLAGE GREEN DR
City-St-Zip: PLANT CITY, FL 33566

Title: PELC (X) Change () Addition
Name: WOFFORD, MONICA
Address: PO BOX 683316
City-St-Zip: ORLANDO, F 32868

Title: PP (X) Change () Addition
Name: TIMMONS, DAVE
Address: PO BOX 340025
City-St-Zip: TAMPA, FL 33694

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY MONTGOMERY

ADMI

04/18/2008

Electronic Signature of Signing Officer or Director

_____ Date