2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N11477

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: GEROUX, SANDY
Address: 3760 MANTEO CIRCLE
City-St-Zip: ORLANDO, FL 32837

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: KATHY, POTTS
Address: 8535 MANASSAS RD
City-St-Zip: TAMPA, FL 33635

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

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

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: MONICA WOFFORD PRES 04/16/2009

Electronic Signature of Signing Officer or Director — Date