

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25662

**Entity Name:** NATIONAL SENIORS BENEVOLENT ASSOCIATION, INC.

**Current Principal Place of Business:**

2194 MAIN STREET  
SUITE H  
DUNEDIN, FL 34698

**Current Mailing Address:**

P.O. BOX 4296  
HIGHLAND PARK, NJ 08904

**FEI Number:** 59-2904254

**Certificate of Status Desired:** No

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

RUBAIL, JAWDET I ESQUIRE  
1358 S. MISSOURI AVENUE  
CLEARWATER, FL 33756 US

*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

**Officer/Director Detail :**

Title VTD  
Name HOWELL, CHRISTOPHER  
Address 1861 SADDLE HILL ROAD, S  
City-State-Zip: DUNEDIN FL 34698

Title DIRECTOR  
Name MALTESE, MARIA  
Address 1599 MCAULIFFE LANE  
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR  
Name MASTRO, STEPHEN  
Address 3053 EGRET TERRACE  
City-State-Zip: SAFETY HARBOR FL 34695

Title PRESIDENT, DIRECTOR  
Name BURR, FRANKLIN II  
Address P O BOX 4296  
City-State-Zip: HIGHLAND PARK NJ 08904

Title DIRECTOR  
Name SILVERMAN, STEWART  
Address 885 BERKLEY COURT N.  
City-State-Zip: PALM HARBOR FL 34684

*I hereby 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 all other like empowered.*

**SIGNATURE:** FRANKLIN BURR II

**PRESIDENT DIRECTOR**

**04/30/2016**

Electronic Signature of Signing Officer/Director Detail

Date