

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004933

Entity Name: NSB CAPS, INC.**Current Principal Place of Business:**1400 PALMETTO ST
NEW SMYRNA BEACH, FL 32168**Current Mailing Address:**PO BOX 1808
NEW SMYRNA BEACH, FL 32170-1808**FEI Number:** 59-3298590**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SAPPINGTON, SUSAN
1400 PALMETTO ST
NEW SMYRNA BEACH, FL 32168 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:** SUSAN SAPPINGTON

01/14/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN
Name	PETERSON, CARISSA
Address	472 OLD MISSION RD
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	TREASURER
Name	SAPPINGTON, SUSAN
Address	1400 PALMETTO ST
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	OTHER
Name	LANE, SHAWN
Address	2411 GLENMORE CT
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	SECRETARY
Name	GINTZ, SHANNON
Address	PO BOX 1808
City-State-Zip:	NEW SMYRNA BEACH FL 32170-1808

Title	VC
Name	FAUDIE, BYRON
Address	1792 COLLEGE PARK DR
City-State-Zip:	TAVARES FL 32778

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: SUSAN SAPPINGTON**TREASURER**

01/14/2019

Electronic Signature of Signing Officer/Director Detail

Date