

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000083586

**Entity Name:** NSN, INC.

**Current Principal Place of Business:**

12443 SAN JOSE BLVD  
STE 502  
JACKSONVILLE, FL 32223

**Current Mailing Address:**

12443 SAN JOSE BLVD  
STE 502  
JACKSONVILLE, FL 32223 US

**FEI Number:** 37-1892304

**Certificate of Status Desired:** No

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

FRAZIER, MICHAEL A  
12443 SAN JOSE BLVD  
STE 502  
JACKSONVILLE, FL 32223 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            P  
Name            FRAZIER, MICHAEL A  
Address        1104 PAWNEE PLACE  
City-State-Zip: SAINT JOHNS FL 32259

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHAEL FRAZIER

**PRESIDENT**

**02/12/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date