

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000000610

**Entity Name:** NLFC HOLDINGS CORP.**Current Principal Place of Business:**814 HIGHWAY A1A NORTH  
SUITE 205  
PONTE VEDRA BEACH, FL 32082**Current Mailing Address:**303 FELLOWSHIP ROAD  
SUITE 310  
MT. LAUREL, NJ 08054 US**FEI Number:** 27-1877212**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPDIRECT AGENTS, INC  
1200 SOUTH PINE ISLAND ROAD  
MIAMI, FL 33324 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 DIRECTOR  
Name HARTMAN, LARRY  
Address 814 HIGHWAY A1A NORTH  
SUITE 205  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR  
Name MOSELEY, ALLEN  
Address 814 HIGHWAY A1A NORTH  
SUITE 205  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR  
Name SCHWARTZ, BRAD  
Address 814 HIGHWAY A1A NORTH  
SUITE 205  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR  
Name KORN, AVI  
Address 814 HIGHWAY A1A NORTH  
SUITE 205  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title TREASURER  
Name PFALTZGRAFF, RICHARD  
Address 303 FELLOWSHIP ROAD  
SUITE 310  
City-State-Zip: MOUNT LAUREL NJ 08054

Title CFO  
Name PFALTZGRAFF, RICHARD  
Address 303 FELLOWSHIP ROAD  
SUITE 310  
City-State-Zip: MOUNT LAUREL NJ 08054

Title SECRETARY  
Name PFALTZGRAFF, RICHARD  
Address 303 FELLOWSHIP ROAD  
SUITE 310  
City-State-Zip: MOUNT LAUREL NJ 08054

Title PRESIDENT / CEO / DIRECTOR  
Name SHIVERS, GARY  
Address 814 HIGHWAY A1A NORTH  
SUITE 205  
City-State-Zip: PONTE VEDRA BEACH FL 32082

*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: RICHARD PFALTZGRAFF****SECRETARY****04/05/2018**

Electronic Signature of Signing Officer/Director Detail

Date