

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724487

FILED  
Apr 02, 2012  
Secretary of State

**Entity Name:** CENTRAL FLORIDA CHAPTER, INC. OF N.E.C.A.

**Current Principal Place of Business:**

2103 W CASS STREET  
TAMPA, FL 33606 US

**New Principal Place of Business:**

**Current Mailing Address:**

2103 W CASS STREET  
TAMPA, FL 33606 US

**New Mailing Address:**

**FEI Number:** 59-1440239

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COPPERSMITH, ROBERT R  
2103 W CASS STREET  
TAMPA, FL 33606 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:** P  
**Name:** DUFFIELD, G. CURTIS  
**Address:** PO BOX 1375  
**City-St-Zip:** SORRENTO, FL 32776 US

**Title:** GOV  
**Name:** MADDOX, SCOTT  
**Address:** PO BOX 22164  
**City-St-Zip:** LAKE BUENA VISTA, FL 32830 US

**Title:** VP  
**Name:** SHINNEMAN, JASON  
**Address:** 6850 NEW TAMPA HIGHWAY, SUITE 100  
**City-St-Zip:** LAKELAND, FL 33815 US

**Title:** SM  
**Name:** COPPERSMITH, ROBERT R  
**Address:** 2103 W CASS STREET  
**City-St-Zip:** TAMPA, FL 33606 US

**Title:** T  
**Name:** MAXWELL, GUY  
**Address:** PO BOX 22683  
**City-St-Zip:** LAKE BUENA VISTA, FL 32830 US

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:** ROBERT R. COPPERSMITH

SM

04/02/2012

Electronic Signature of Signing Officer or Director

Date