

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726214

FILED
Feb 08, 2011
Secretary of State

Entity Name: NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS-JACKSONVILLE, FLORIDA, INC.

Current Principal Place of Business:

12020 WINSTEAD RD
JACKSONVILLE, FL 32220

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 37028
JACKSONVILLE, FL 32236

New Mailing Address:

FEI Number: 59-1890671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOMBS OHMER, CHERRI M
12020 WINSTEAD RD
JACKSONVILLE, FL 32220 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: B
Name: ALICIA, BURST B
Address: 4190 BELFORT ROAD, SUTE 110
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: D
Name: MALTESE, JOSEPH J VC
Address: 3112 ST. JOHNS BLUFF ROAD SOUTH
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: SM
Name: COOMBS OHMER, CHERRI M S,M
Address: 12020 WINSTEAD RD
City-St-Zip: JACKSONVILLE, FL 32220

Title: T
Name: SCHLUETER, MICHAEL
Address: 10151 DEERWOOD PARK BLVD BLDG 100, STE 300
City-St-Zip: JACKSONVILLE, FL 32256

Title: B
Name: MARKWALTER, II, ROBERT D BC
Address: 8649 BAYPINE ROAD, BLDG 7, STE 100
City-St-Zip: JACKSONVILLE, FL 32256

Title: P
Name: VEENSTRA, CHRISTOPHER E VP
Address: 2730 US 1 SOUTH, SUITE F
City-St-Zip: SAINT AUGUSTINE, FL 32086

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: CHERRI COOMBS OHMER

S

02/08/2011

Electronic Signature of Signing Officer or Director

Date