

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 743423

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** THE NATIONS ASSOCIATION CHARITIES, INC.

**Current Principal Place of Business:**

4625 PALM BEACH BLVD.  
FT. MYERS, FL 33905

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1060  
FT MYERS, FL 33902 US

**New Mailing Address:**

**FEI Number:** 59-1840066

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SUAREZ, ISRAEL  
1745 EMERALD COVE CIR  
CAPE CORAL, FL 33991 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: VD  
Name: SGROI, RICHARD  
Address: 929 S.W. 8TH PLACE UNIT 201  
City-St-Zip: CAPE CORAL, FL 33991

Title: STD  
Name: SHEPARD, LUCY  
Address: 13881 RIVER FOREST DR  
City-St-Zip: FT MYERS, FL

Title: PD  
Name: SUAREZ, ISRAEL  
Address: PO BOX 50495  
City-St-Zip: FORT MYERS, FL 33994

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: ISRAEL SUAREZ

PD

01/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date