

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 837875

FILED  
Feb 16, 2011  
Secretary of State

**Entity Name:** THE NASSAU/PARADISE ISLAND PROMOTION BOARD, INC.

**Current Principal Place of Business:**

1200 S. PINE ISLAND ROAD  
STE. #700  
PLANTATION, FL 33324 US

**New Principal Place of Business:**

**Current Mailing Address:**

1200 S. PINE ISLAND ROAD  
STE. #700  
PLANTATION, FL 33324 US

**New Mailing Address:**

**FEI Number:** 59-1707145

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BESKIN, JAY  
GRAY, ROBINSON ATTORNEYS AT LAW  
401 E. LAS OLAS BLVD., SUITE 1850  
FORT LAUDERDALE, FL 33301 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: CEO  
Name: LOUNSBERRY, FRED J CTC  
Address: 1200 S PINE ISLAND RD STE 700  
City-St-Zip: PLANTATION, FL 33324

Title: ESD  
Name: RECKLEY, MICHAEL  
Address: 1200 S PINE ISLAND RD STE 700  
City-St-Zip: PLANTATION, FL 33324

Title: CD  
Name: MYERS, GEORGE  
Address: 1200 S PINE ISLAND RD STE 700  
City-St-Zip: PLANTATION, FL 33324

Title: TREA  
Name: NAUGHTON, WILLIAM  
Address: 1200 S. PINE ISLAND ROAD. SUITE 700  
City-St-Zip: PLANTATION, FL 33324 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: JOANN ACKERMAN

VP F

02/16/2011

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

\_\_\_\_\_  
Date