

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004918

FILED
Mar 03, 2009
Secretary of State

Entity Name: NATIONAL AMERICAS INVESTMENT, INC.

Current Principal Place of Business:

245 PARK AVE
28TH FLOOR
NEW YORK, NY 10167

New Principal Place of Business:

Current Mailing Address:

245 PARK AVE
28TH FLOOR
NEW YORK, NY 10167

New Mailing Address:

FEI Number: 59-3544231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: WHITESIDE, JOSEPH J
Address: 203 CYPRESS KNOLL DRIVE
City-St-Zip: SEWICKLEY,, PA 15143

Title: DIR () Delete
Name: RICHARDS, BRUCE T
Address: 245 PARK AVE, 28TH FLOOR
City-St-Zip: NEW YORK, NY 10167

Title: DIR () Delete
Name: MOORE, SIMON
Address: 245 PARK AVE, 28TH FLOOR
City-St-Zip: NEW YORK, NY 10167

Title: CSEC () Delete
Name: CAHANEY, MARK
Address: 245 PARK AVE, 28TH FLOOR
City-St-Zip: NEW YORK, NY 10167

Title: VP () Delete
Name: EHRLICH, IRA
Address: 1601 SOUTH OCEAN DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP () Delete
Name: WOODS, DEA
Address: 245 PARK AVENUE, 28TH FLR.
City-St-Zip: NEW YORK, NY 10167

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARK CAHANEY

CSEC

03/03/2009

Electronic Signature of Signing Officer or Director

Date