

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 16, 2007 8:00 am**  
**Secretary of State**

02-16-2007 90044 019 \*\*\*150.00

**DOCUMENT # F03000002296**

1. Entity Name  
**NAMETAG CENTRAL, INC.**



Principal Place of Business  
**3873 AIRPORT WAY #9754  
BELLINGHAM, WA 98227-9754**

Mailing Address  
**3873 AIRPORT WAY #9754  
BELLINGHAM, WA 98227-9754**

**40019570**



**DO NOT WRITE IN THIS SPACE**

01172007 No Chg-P CR2E034 (11/05)

4. FEI Number  
**76-0732993**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent -**

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

|                |   |
|----------------|---|
| TITLE          | DP  |
| NAME           | KOTT, MARLA   |
| STREET ADDRESS | 8687 YUKON STREET 21320 GORDON WAY                  |
| CITY-ST-ZIP    | VANCOUVER B.C., V5X4V1 UNIT 260 RICHMOND BC V6W 1J8 |
| TITLE          | DV  |
| NAME           | FLANDERS, ELLEN                                     |
| STREET ADDRESS | 8687 YUKON STREET 21320 GORDON WAY                  |
| CITY-ST-ZIP    | VANCOUVER B.C., V5X4V1 UNIT 260 RICHMOND BC V6W 1J8 |
| TITLE          | S   |
| NAME           | MACMILLAN, KRISTIN                                  |
| STREET ADDRESS | 8687 YUKON STREET 21320 GORDON WAY                  |
| CITY-ST-ZIP    | VANCOUVER B.C., V5X4V1 UNIT 260 RICHMOND BC V6W 1J8 |
| TITLE          |   |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-ST-ZIP    |   |
| TITLE          |   |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-ST-ZIP    |   |

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Feb 6/07 604-278-5372