

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90059 045 ***150.00

DOCUMENT # F04000006480

1. Entity Name
NTS REALTY CAPITAL, INC.



Principal Place of Business
**10172 LINN STATION ROAD
LOUISVILLE, KY 40223**

Mailing Address
**10172 LINN STATION ROAD
LOUISVILLE, KY 40223**

Accountant _____ Date _____

Acctg Manager _____ Date _____

Acctg Manager _____ Date _____



01042007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

90-0127711

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR
SUITE 4
WESTON, FL 33331**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE TV
NAME PITCHFORD, DAVID B ☐ Delete
STREET ADDRESS 10172 LINN STATION ROAD
CITY-ST-ZIP LOUISVILLE, KY 40223

TITLE _____ ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE EVP
NAME WELLS, GREG ☐ Delete
STREET ADDRESS 10172 LINN STATION ROAD
CITY-ST-ZIP LOUISVILLE, KY 40223

TITLE _____ ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE SV
NAME HOWARD, SUSAN M ☐ Delete
STREET ADDRESS 10172 LINN STATION ROAD
CITY-ST-ZIP LOUISVILLE, KY 40223

TITLE _____ ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE D
NAME ANDERSON, MARK D ☐ Delete
STREET ADDRESS 10350 ORNSBY PARK PL, STE 602
CITY-ST-ZIP LOUISVILLE, KY 40223

TITLE _____ ☒ Change ☐ Addition
NAME _____
STREET ADDRESS 10350 Ormsby Park Place, Suite 602
CITY-ST-ZIP _____

TITLE D
NAME DALY, JOHN ☐ Delete
STREET ADDRESS 1441 GARDINER LANE
CITY-ST-ZIP LOUISVILLE, KY 40213

TITLE _____ ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE D
NAME LENIHAN, JOHN ☐ Delete
STREET ADDRESS 5000 CRITTENDEN DR
CITY-ST-ZIP LOUISVILLE, KY 40209

TITLE _____ ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

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

Susan M. Howard VP/Secretary

Date

Daytime Phone #

4/10/07 (502) 426-4800

ATTACHMENT
NTS REALTY CAPITAL, INC.

40106813
#F04000006480

10. ADDITIONAL OFFICERS AND DIRECTORS:

TITLE: D/CHAIRMAN
NAME: J. D. NICHOLS
ADDRESS: 10172 LINN STATION ROAD
CITY/ST/ZIP: LOUISVILLE, KY 40223

TITLE: D/P
NAME: BRIAN F. LAVIN
ADDRESS: 10172 LINN STATION ROAD
CITY/ST/ZIP: LOUISVILLE, KY 40223

TITLE: EVP
NAME: BRYAN R. RUSSELL
ADDRESS: 10172 LINN STATION ROAD
CITY/ST/ZIP: LOUISVILLE, KY 40223

TITLE: SVP
NAME: ROSANN D. TAFEL
ADDRESS: 10172 LINN STATION ROAD
CITY/ST/ZIP: LOUISVILLE, KY 40223

TITLE: SVP
NAME: TIMOTHY A. BAKER
ADDRESS: 10172 LINN STATION ROAD
CITY/ST/ZIP: LOUISVILLE, KY 40223

TITLE: SVP
NAME: NEIL A. MITCHELL
ADDRESS: 10172 LINN STATION ROAD
CITY/ST/ZIP: LOUISVILLE, KY 40223