

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 08:00 A
Secretary of State

DOCUMENT # F05000004637

1. Entity Name
N-ASSOCIATES, INC.



Principal Place of Business
112 BAYBRIDGE DR
GULF BREEZE, FL 32561

Mailing Address
112 BAYBRIDGE DR
GULF BREEZE, FL 32561



04112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 75-2920308	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NORWOOD, SUSAN L
112 BAYBRIDGE DR
GULF BREEZE, FL 32561

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

U000000904403

05/01/08-80011-013 150.00

10. OFFICERS AND DIRECTORS

TITLE CP
NAME NORWOOD, RICHARD L
STREET ADDRESS 112 BAYBRIDGE DR
CITY-ST-ZIP GULF BREEZE, FL 32561

TITLE VCST
NAME NORWOOD, SUSAN L
STREET ADDRESS 112 BAYBRIDGE DR
CITY-ST-ZIP GULF BREEZE, FL 32561

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CITY-ST-ZIP

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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: Susan L. Norwood
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/08 850-934-3115
Date Daytime Phone #