

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J00493

FILED
Apr 27, 2012
Secretary of State

Entity Name: NTS REALTY COMPANY OF FLORIDA

Current Principal Place of Business:

C/O NTS CORPORATION
10172 LINN STATION ROAD
LOUISVILLE, KY 40223

New Principal Place of Business:

C/O NTS CORPORATION
600 N HURSTBOURNE PARKWAY SUITE 300
LOUISVILLE, KY 40222

Current Mailing Address:

C/O NTS CORPORATION
10172 LINN STATION ROAD
LOUISVILLE, KY 40223

New Mailing Address:

C/O NTS CORPORATION
600 N HURSTBOURNE PARKWAY SUITE 300
LOUISVILLE, KY 40222

FEI Number: 59-2698270

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEEKIN, JAMES JR
215 N EOLA DR
ORLANDO, FL 32801 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: DC
Name: NICHOLS, J D
Address: 600 N HURSTBOURNE PARKWAY SUITE 300
City-St-Zip: LOUISVILLE, KY 40222

Title: SVP
Name: WELLS, GREGORY A
Address: 600 N HURSTBOURNE PARKWAY SUITE 300
City-St-Zip: LOUISVILLE, KY 40222

Title: EVP
Name: LAVIN, BRIAN F
Address: 600 N HURSTBOURNE PARKWAY SUITE 300
City-St-Zip: LOUISVILLE, KY 40222

Title: VPS
Name: HOWARD, SUSAN M
Address: 600 N HURSTBOURNE PARKWAY SUITE 300
City-St-Zip: LOUISVILLE, KY 40222

Title: VPAT
Name: MITCHELL, NEIL A
Address: 600 N HURSTBOURNE PARKWAY SUITE 300
City-St-Zip: LOUISVILLE, KY 40222

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUSAN M HOWARD

VPS

04/27/2012

Electronic Signature of Signing Officer or Director

_____ Date