

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J62755

FILED  
Apr 26, 2008  
Secretary of State

Entity Name: NNAPS INCORPORATION

## Current Principal Place of Business:

% WILLIE SPANN  
5748 AVENUE B  
JACKSONVILLE, FL 32209

## New Principal Place of Business:

## Current Mailing Address:

% WILLIE SPANN  
5748 AVENUE B  
JACKSONVILLE, FL 32209

## New Mailing Address:

FEI Number: 59-2790322

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPANN, WILLIE  
5748 AVENUE B  
JACKSONVILLE, FL 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: D ( ) Delete  
Name: SPANN, WILLIE,  
Address: 5748 AVENUE B  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: SPANN, BARNEY  
Address: 154 WEST 6TH STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: D ( ) Delete  
Name: SPANN, ALFRED  
Address: 8942 CASTLE BLVD  
City-St-Zip: JACKSONVILLE, FL 32208

Title: D ( ) Delete  
Name: BRADFORD, VIVIAN  
Address: 8819 CAMPHOR  
City-St-Zip: JACKSONVILLE, FL 32208

## 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  
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: WILLIE SPANN

P

04/26/2008

Electronic Signature of Signing Officer or Director

Date