2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001758

FILED Apr 14, 2008 Secretary of State

Entity Name: NATIONAL INDEPENDENT CONCESSIONAIRES ASSOCIATION, INC.

	rincipal Place	e of Business:		New Principal Place of Business:		
SUITE 1B	HAVENUE NC			SUITE C	RSONS AVE. I, FL 33510	
Current Mailing Address:				New Mailing Address:		
	HAVENUE NC				RSONS AVE.	
SUITE 1B ST PETERSBURG, FL 33710				SUITE C BRANDON, FL 33510		
	: 65-0404654	FEI Number Applied For ()	EEI Num	nber Not Appl		Certificate of Status Desired ()
		,		•	, ,	
Name and	l Address of (Current Registered Agent:		Name and	Address of N	ew Registered Agent:
1012 SOŃ	TIMOTHY S IATA LANE BEACH, FL 33	3572 US				
	e named entity e of Florida.	submits this statement for the	e purpose of	f changing i	ts registered of	ffice or registered agent, or both,
SIGNATUI						
Electronic Signature of Registered Agent				Date		
OFFICER	S AND DIREC	CTORS:		ADDITION	IS/CHANGES	TO OFFICERS AND DIRECTOR
Fitle: Name: Address: City-St-Zip:	GAYLE, MCGR	LAND AVE., #232		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title:	P (TIMOTHY, O'B			Title: Name: Address:	JIM, HODSON 1 483 NORTH 700) WEST
Name: Address: City-St-Zip:	1012 SONATA APOLLO BEAC			City-St-Zip:	KOKOMO, IN 4	0001
Address:	APOLLO BEAC	OH, FL 33572) Delete II II		City-St-Zip: Title: Name: Address: City-St-Zip:		Change ()Addition SON AKS BLVD
Address: City-St-Zip: Title: Name: Address:	APOLLO BEAC VP (JIM, HODSON 483 NORTH 70 KOKOMO, IN	CH, FL 33572) Delete I II 00 WEST 46901) Delete HERT ERS ROAD		Title: Name: Address:	VP (X) THOMAS, HODS 3176 GREAT O KISSIMMEE, FL	Change ()Addition SON AKS BLVD
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	APOLLO BEAC VP (JIM, HODSON 483 NORTH 70 KOKOMO, IN - SEC (RANDY, REICH 12525 MEGGE KIEL, WI 5304	OH, FL 33572) Delete I II 00 WEST 46901) Delete HERT ERS ROAD 42) Delete DSON OAKS BLVD		Title: Name: Address: City-St-Zip: Title: Name: Address:	VP (X) THOMAS, HODS 3176 GREAT O KISSIMMEE, FL	Change () Addition SON AKS BLVD . 34744 Change () Addition Change () Addition SE EON ST.

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

SIGNATURE: JIM HODSON II P 04/14/2008