

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003640

FILED
May 01, 2008
Secretary of State

Entity Name: GREATER NATURIST ORGANIZATION OF MALES EVOLVING SOCIALLY, INC.

Current Principal Place of Business:

B O X 692521
ORLANDO, FL 32869

New Principal Place of Business:

B O X 691898
ORLANDO, FL 32869

Current Mailing Address:

POST OFFICE BOX 692521
ORLANDO, FL 328692521

New Mailing Address:

POST OFFICE BOX 691898
ORLANDO, FL 328691898

FEI Number: 20-0008903 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SLUSARZ, JOHN W
777 WILDMERE AVENUE
LONGWOOD, FL 32750 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: PSD () Delete
Name: DRACO, CHRISTOPHER J
Address: POST OFFICE BOX 691898
City-St-Zip: ORLANDO, FL 328691898

Title: VD () Delete
Name: DRACO, MICHAEL A
Address: POST OFFICE BOX 691898
City-St-Zip: ORLANDO, FL 328691898

Title: TD () Delete
Name: SLUSARZ, JOHN W
Address: 777 WILDMERE AVENUE
City-St-Zip: LONGWOOD, FL 32792

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:

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: CHRISTOPHER J DRACO

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date