

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004797

FILED
Aug 12, 2011
Secretary of State

Entity Name: NAMI OSCEOLA INC.

Current Principal Place of Business:

206 PARK PLACE BLVD
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

206 PARK PLACE BLVD
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 04-3779829

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, SHELLEY L
334 MARYLAND AVE
ST. CLOUD, FL 34769 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: D/P
Name: WATSON, SHELLEY L
Address: 334 MARYLAND AVE
City-St-Zip: ST. CLOUD, FL 34769

Title: DVP
Name: EDELEN, DELORES
Address: PO BOX 421177
City-St-Zip: KISSIMMEE, FL 34741

Title: D
Name: STEWART, PARRY
Address: 206 PARK PLACE BLVD
City-St-Zip: KISSIMMEE, FL 34741

Title: D/S
Name: PACURARI, JUDY
Address: 206 PARK PLACE BLVD
City-St-Zip: KISSIMMEE, FL 34741

Title: D/S
Name: HONEY, MARTIE
Address: 206 PARK PLACE BLVD
City-St-Zip: KISSIMMEE, FL 34741

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

SIGNATURE: SHELLEY L. WATSON

P

08/12/2011

Electronic Signature of Signing Officer or Director

Date