

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04604

FILED
Jan 08, 2009
Secretary of State

Entity Name: NAIFA-NORTH SUNCOAST, INC.

Current Principal Place of Business:

2509 CHEVAL DR
HOLIDAY, FL 34690867 US

New Principal Place of Business:

2509 CHEVAL DR
HOLIDAY, FL 34690 US

Current Mailing Address:

P.O. BOX 894
NEW PORT RICHEY, FL 346560894 US

New Mailing Address:

FEI Number: 59-2468436 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAY, MICHAEL V
2509 CHEVAL DR
HOLIDAY, FL 34690 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 () Delete
Name: PETERS, JAMES M
Address: 11315 LITTLE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: D () Delete
Name: HOLLADAY, TIMOTHY
Address: 5824 US 19 STE A
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: T () Delete
Name: KEEGAN, JAMES W
Address: 4632 GLISSADE DR.
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D () Delete
Name: BLAIR, GWYNN
Address: 617 LAMAR AVE
City-St-Zip: BROOKSVILLE, FL 34601

Title: D () Delete
Name: NOEL, CHRISTINE
Address: 4312 WOODLARK DR
City-St-Zip: TAMPA, FL 33624

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: STUART, SHELITA
Address: 7516 RIDGE ROAD
City-St-Zip: PORT RICHEY, FL 34668

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HERSH, CAROLYN
Address: 14174 US 19 NORTH
City-St-Zip: HUDSON, FL 34667

Title: VP (X) Change () Addition
Name: NOEL, CHRISTINE
Address: 4312 WOODLARK DR
City-St-Zip: TAMPA, FL 33624

Title: S () Change (X) Addition
Name: NADING, SUZANNE
Address: 11315 LITTLE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

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: JAMES W. KEEGAN

T

01/08/2009

Electronic Signature of Signing Officer or Director

Date