

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09958

FILED
Apr 20, 2011
Secretary of State

Entity Name: NAMI POLK COUNTY, INC.

Current Principal Place of Business:

1090 US HWY 17 S.
BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

1090 US HWY 17 S.
BARTOW, FL 33830

New Mailing Address:

FEI Number: 59-2600811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NAMI POLK
1090 US HWY 17 S.
BARTOW, FL 33830 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: PRES
Name: ARTHUR, DIANA
Address: 1812 MICHELLE LANE
City-St-Zip: LAKELAND, FL 33813 US

Title: VPRE
Name: HOFFMAN, BARBARA
Address: 6939 LACY DRIVE
City-St-Zip: LAKELAND, FL 33813 US

Title: TRES
Name: TYSON, ANNE MD
Address: 6700 S FLORIDA AVENUE #13
City-St-Zip: LAKELAND, FL 33803 US

Title: SEC
Name: HOFFMAN, CAROL
Address: 6036 SEAGULL LANE
City-St-Zip: LAKELAND, FL 33809 US

Title: MR
Name: DWYER, NEAL MA
Address: 1716 AVANT STREET
City-St-Zip: VALRICO, FL 33594 US

Title: LT
Name: GARRETT, BRIAN BRD MBR
Address: 455 N BROADWAY AVE
City-St-Zip: BARTOW, FL 33831 US

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: MELISSA SONGER

DIR

04/20/2011

Electronic Signature of Signing Officer or Director

Date