2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24328

FILED May 06, 2008 Secretary of State

Entity Name: CHARLOTTE HARBOR CHAPTER OF NSPI, INC.

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
2811 TAMI	IAMI TR			
PORT CH	ARLOTTE, FL 33952 US			
Current Mailing Address:		New Maili	New Mailing Address:	
2811 TAMI	IAMI TR			
PORT CH	ARLOTTE, FL 33952 US			
In accordan	: 65-0127624 FEI Number Applied For () FEI ce with s. 607.193(2)(b), F.S., the corporation did not recei I Address of Current Registered Agent:	-	• • • • • • • • • • • • • • • • • • • •	
BROOKS, 258 BANG	MITCHELL T SBERG RD SE LOTTE, FL 33952 US			
	named entity submits this statement for the purpose of Florida.	e of changing	its registered office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICERS	S AND DIRECTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPP () Delete TERHUNE, FRED PO BOX 494271 PORT CHARLOTTE, FL 33949	Title: Name: Address: City-St-Zip:	T (X) Change () Addition TERHUNE, FRED PO BOX 494271 PORT CHARLOTTE, FL 33949	
Title: Name: Address: City-St-Zip:	DP () Delete COCCARO, PETER 18380 PAULSON DR PORT CHARLOTTE, FL 33954	Title: Name: Address: City-St-Zip:	DPP (X) Change () Addition COCCARO, PETER 18380 PAULSON DR PORT CHARLOTTE, FL 33954	
Title: Name: Address: City-St-Zip:	DT () Delete BAUBLITZ, SAM 4507 9TH ST W SUITE #I-8 BRADENTON, FL 34207	Title: Name: Address: City-St-Zip:	DP (X) Change () Addition BAUBLITZ, SAM 4507 9TH ST W SUITE #I-8 BRADENTON, FL 34207	
Title: Name: Address: City-St-Zip:	D () Delete MCTIGUE, COLIN 19800 VETERANS HWY PT CHARLOTTE, FL 33954	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVP () Delete PETERSON, KRIS 2310 TAMIAMI TRAIL # 1157 PUNTA GORDA, FL 33950	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete SAM, BAUBLITZ 4509 9TH STREET WEST, SUITE I-8 BRADENTON, FL 34207	Title: Name: Address: City-St-Zip:	S (X) Change () Addition TERHUNE, FRED PO BOX 494271 PORT CHARLOTTE, FL 33949	

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: MITCHELL T BROOKS RA 05/06/2008