

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35930

FILED  
Feb 15, 2012  
Secretary of State

**Entity Name:** THE NATIONAL INSTITUTE FOR STORAGE TANK MANAGEMENT, INC.

**Current Principal Place of Business:**

2203 N LOIS AVENUE  
SUITE #900  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 26008  
TAMPA, FL 33623

**New Mailing Address:**

**FEI Number:** 65-0170282

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DE MARTINI, JAMES  
2203 N LOIS AVE  
SUITE #900  
TAMPA, FL 33607 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: P  
Name: DE MARTINI, JAMES D  
Address: 2203 N. LOIS AVE, SUITE #900  
City-St-Zip: TAMPA, FL 33607

Title: D  
Name: DE MARTINI, JOE  
Address: 2203 N. LOIS AVE, SUITE #900  
City-St-Zip: TAMPA, FL 33607

Title: D  
Name: EARLEY, DORIS  
Address: 2203 N. LOIS AVE, SUITE #900  
City-St-Zip: TAMPA, FL 33607

Title: D  
Name: CHLANDA, TERRY  
Address: 2203 N. LOIS AVE, SUITE #900  
City-St-Zip: TAMPA, FL 33607

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: JAMES DEMARTINI

P

02/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date