

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003428

FILED  
Apr 09, 2012  
Secretary of State

**Entity Name:** THE NATIONAL ASSOCIATION OF THE BAHAMAS, INC.

**Current Principal Place of Business:**

1200 PINE ISLAND ROAD  
SUITE 750  
PLANTATION, FL 33324 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 162039  
MIAMI, FL 33116

**New Mailing Address:**

**FEI Number:** 65-0525850      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MILLER, EARL A  
10240 SW 15TH ST  
PEMBROKE PINES, FL 33025 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: T  
Name: ASH, DONNA  
Address: 1535 NW 8TH TERRACE  
City-St-Zip: MIAMI, FL 33125

Title: C  
Name: JACKSON, JANET  
Address: 730 N.W. 50TH STREET  
City-St-Zip: MIAMI, FL 33127

Title: P  
Name: GOMEZ, ROSAMON L  
Address: 11260 S.W. 138 STREET  
City-St-Zip: MIAMI, FL 33176

Title: EXD  
Name: MILLER, EARL  
Address: 10240 SW 15TH ST  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: S  
Name: JAMES, HILDA  
Address: 17000 S.W. 90 AVENUE  
City-St-Zip: MIAMI, FL 33157

Title: VP  
Name: RUBYANN, BRADSHAW  
Address: 432 NW 111 TERRACE  
City-St-Zip: MIAMI, FL 33132

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: ROSAMON L. GOMEZ

P

04/09/2012

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

\_\_\_\_\_  
Date