

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2008
Secretary of State

DOCUMENT# N94000006223

Entity Name: NANA'S HOUSE, INC.

Current Principal Place of Business:

610 FERRIS ST
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

Current Mailing Address:

610 FERRIS ST
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

FEI Number: 59-3286023 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'LINGER, JOHN W
8512 MOODT CANAL RD
SAINT AUGUSTINE, FL 32092 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: PD () Delete
Name: BROWN, THEODORE E
Address: 6498 OAK DR
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: VD () Delete
Name: DYER, EDWARD
Address: 851 BULKHEAD RD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D () Delete
Name: ROBERTS, MATTHEW
Address: 840 COOKS LANE APT 102
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: TD () Delete
Name: OLINGER, JOHN
Address: 8512 MOODY CANAL RD
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: D () Delete
Name: DENTON, ROGER
Address: 1149 IDLEWILD AVE #13
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JOHN OLINGER

TD

02/08/2008

Electronic Signature of Signing Officer or Director

_____ Date