

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004933

Entity Name: NSB CAPS, INC.

FILED  
Jul 09, 2007  
Secretary of State

## Current Principal Place of Business:

1015 10TH STREET  
NEW SMYRNA BEACH, FL 32168

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1808  
NEW SMYRNA BEACH, FL 321701808

## New Mailing Address:

FEI Number: 59-3298590      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

ELDRIDGE, HEIDI L  
684 SANDBERG LANE  
NEW SMYRNA BEACH, FL 32168      US

## Name and Address of New Registered Agent:

BAYLES, SALLY A  
503 N CAUSEWAY, #501  
NEW SMYRNA BEACH, FL 32169      US

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: SALLY A BAYLES

07/09/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD      ( ) Delete  
Name: LANE, SHAWN  
Address: 2411 GLINMORE CT  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: SD      ( ) Delete  
Name: DESOTO, JODI R  
Address: 4313 GULF COVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP      ( ) Delete  
Name: KOPP, LORI W  
Address: 2071 MARSH HARBOUR DR  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: TD      ( ) Delete  
Name: ELDRIDGE, HEIDI L  
Address: 684 SANDBERG LANE  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD      (X) Change ( ) Addition  
Name: LANE, SHAWN  
Address: 2411 GLENMORE CT  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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

Title: VP      (X) Change ( ) Addition  
Name: GREATREX, WALTER W  
Address: 2938 MANGO TREE RD.  
City-St-Zip: EDGEWATER, FL 32141

Title: TD      (X) Change ( ) Addition  
Name: BAYLES, SALLY A  
Address: 503 N. CAUSEWAY, #501  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: SALLY A BAYLES

TD

07/09/2007

Electronic Signature of Signing Officer or Director

Date