

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000861

FILED
Jan 28, 2010
Secretary of State

Entity Name: NEW CENTURY INSTITUTE, INC.

Current Principal Place of Business:

4850 NE 2ND AVENUE
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

4850 NE 2ND AVENUE
MIAMI, FL 33137

New Mailing Address:

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

Name and Address of Current Registered Agent:

GISSSEN, MATTHEW
4500 ISLAND ROAD
MIAMI, FL 33137 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: D
Name: POWERS, GARY
Address: 555 STOCKTON ST.
City-St-Zip: JACKSONVILLE, FL 32204

Title: VD
Name: HAMILTON, NANCY
Address: 6655 66 STREET N.
City-St-Zip: PINELLAS PARK, FL 33781

Title: VD
Name: JACOBS, DICK
Address: 3670 MAGUIRE BLVD., SUITE 110
City-St-Zip: ORLANDO, FL 32803

Title: STD
Name: GISSSEN, MATTHEW J.D.
Address: 4500 ISLAND ROAD
City-St-Zip: MIAMI, FL 33137

Title: VD
Name: OLK, THOMAS M.S.
Address: 3333 WEST PENSACOLA STREET
City-St-Zip: TALLAHASSEE, FL 32304

Title: CD
Name: BELL, CHET
Address: 1220 WILLIS AVENUE
City-St-Zip: DAYTONA BEACH, FL 32114

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: MATTHEW GISSSEN

STD

01/28/2010

Electronic Signature of Signing Officer or Director

Date