

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001618

FILED  
Apr 10, 2008  
Secretary of State

Entity Name: NACM-ICPC PAC, INC.

## Current Principal Place of Business:

5521 W. CYPRESS ST.  
SUITE 200  
TAMPA, FL 33607

## New Principal Place of Business:

## Current Mailing Address:

5521 W. CYPRESS ST.  
SUITE 200  
TAMPA, FL 33607

## New Mailing Address:

FEI Number: 59-3564636

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEEKER, WILLIAM  
5521 W. CYPRESS ST.  
SUITE 200  
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: D ( ) Delete  
Name: LINLEY, GEORGE  
Address: 1501 BELVEDERE RD.  
City-St-Zip: W. PALM BEACH, FL 33406

Title: D ( ) Delete  
Name: SACHER, TOM  
Address: 2339 BEVILLE ROAD  
City-St-Zip: DAYTONA BEACH, FL 32119

Title: D ( ) Delete  
Name: LEAVITT, TOM  
Address: 3802 CORPORATE PARK DR # 100  
City-St-Zip: TAMPA, FL 33619

Title: ST ( ) Delete  
Name: MEEKER, WILLIAM  
Address: 5521 W CYPRESS ST #200  
City-St-Zip: TAMPA, FL 33622

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: UDDO, PATTY  
Address: 314 W LANDSTREET RD  
City-St-Zip: ORLANDO, FL 32824

Title: D (X) Change ( ) Addition  
Name: CAUSEY, BOB  
Address: PO BOX 939  
City-St-Zip: PLANT CITY, FL 33566

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

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

Title: D ( ) Change (X) Addition  
Name: PIVOWAR, JOHN  
Address: 455 FAIRWAY DR #200  
City-St-Zip: DEERFIELD, FL 33441

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: WILLIAM MEEKER

ST

04/10/2008

Electronic Signature of Signing Officer or Director

Date