

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000024019

**FILED**  
**Apr 25, 2010**  
**Secretary of State**

**Entity Name:** NATIONAL INTEGRITY SALES COLLEGE, INC.

**Current Principal Place of Business:**

1200 FT. PICKENS ROAD 7B  
PENSACOLA BEACH, FL 32561

**New Principal Place of Business:**

**Current Mailing Address:**

10787 GOODWOOD BLVD  
BATON ROUGE, LA 70815

**New Mailing Address:**

**FEI Number:** 59-3714939

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BONFANTI, SAMUEL E  
1200 FT. PICKENS ROAD 7B  
PENSACOLA BEACH, FL 32561 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** BONFANTI, SAMUEL E  
**Address:** 1200 FT. PICKENS ROAD 7B  
**City-St-Zip:** PENSACOLA BEACH, FL 32561

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** SAMUEL E. BONFANTI

PRES

04/25/2010

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

\_\_\_\_\_  
Date