

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000083454

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: NACB CERTIFICATION SYSTEMS, INC.

## Current Principal Place of Business:

217 NORTH WESTMONTE DRIVE  
SUITE 3019  
ALTAMONTE SPRINGS, FL 32714

## New Principal Place of Business:

930 WILLISTON PARK PT  
LAKE MARY, FL 32746

## Current Mailing Address:

217 NORTH WESTMONTE DRIVE  
SUITE 3019  
ALTAMONTE SPRINGS, FL 32714

## New Mailing Address:

930 WILLISTON PARK PT  
LAKE MARY, FL 32746

FEI Number: 11-3803597

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BLANTON, THEADORE L SR.  
1093 PRESCOTT BLVD  
DELTONA, FL 32738 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: P ( ) Delete  
Name: BLANTON, THEADORE L SR.  
Address: 1093 PRESCOTT BLVD  
City-St-Zip: DELTONA, FL 32738

Title: EVP ( ) Delete  
Name: CRISPELL, JOSEPH R  
Address: 1579 NORTH RIDGELAKE CIRCLE  
City-St-Zip: LONGWOOD, FL 32750

Title: EVP ( ) Delete  
Name: BLANTON, DIANA S  
Address: 1093 PRESCOTT BLVD  
City-St-Zip: DELTONA, FL 32738

## 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:

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

SIGNATURE: DIANA BLANTON

EVP

04/21/2009

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

\_\_\_\_\_  
Date