

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000013229

Entity Name: NSC OF OKEECHOBEE, INC.

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

22025 NW 262 ST.  
OKEECHOBEE, FL 34972

**New Principal Place of Business:**

3500 SE 38TH AVE.  
OKEECHOBEE, FL 34974

**Current Mailing Address:**

22025 NW 262 ST.  
OKEECHOBEE, FL 34972

**New Mailing Address:**

P.O. BOX 2466  
OKEECHOBEE, FL 349732466

FEI Number: 51-0565712

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CARLSON, NATALIE S  
22025 NW 262 ST.  
OKEECHOBEE, FL 34972 US

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

CARLSON, NATALIE S  
3500 SE 38TH AVE.  
OKEECHOBEE, FL 34974 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: NATALIE CARLSON

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CARLSON, NATALIE S  
Address: P.O. BOX 2466  
City-St-Zip: OKEECHOBEE, FL 349732466

Title: VP  
Name: CARLSON, STEVE W  
Address: P.O. BOX 2466  
City-St-Zip: OKEECHOBEE, FL 349732466 US

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: NATALIE CARLSON

PRES

04/30/2012

Electronic Signature of Signing Officer or Director

Date