


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007 8:00 am
Secretary of State

03-30-2007 90134 016 ***150.00

DOCUMENT # P06000051501	
1. Entity Name NSI BUILDING CORPORATION	

Principal Place of Business 83 SPRING RIDGE DRIVE DEBARY, FL 32713	Mailing Address 83 SPRING RIDGE DRIVE DEBARY, FL 32713
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2. Principal Place of Business - No P.O. Box # 83 Spring Ridge Dr	3. Mailing Address 83 Spring Ridge Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Debarry FL	City & State Debarry FL
Zip 32713	Zip 32713
Country USA	Country USA

6. Name and Address of Current Registered Agent PALMETTO CHARTER SERVICES, INC. 150 MAGNOLIA AVENUE DAYTONA BEACH, FL 32115	
7. Name and Address of New Registered Agent Name: Susan Gordon Street Address (P.O. Box Number is Not Acceptable): 83 Spring Ridge Dr City: Debarry FL Zip Code: 32713	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Susan Gordon Susan Gordon Director/owner 1-25-07
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GORDON, SUSAN 83 SPRING RIDGE DRIVE DEBARY, FL 32713 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susan Gordon Susan Gordon Director/owner 1-25-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

40045561



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4. FEI Number 20-4675442	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
