

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000034809

Entity Name: NESAK, INC.

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

524 NORTH FLORIDA AVE.  
DELAND, FL 32720 US

**New Principal Place of Business:**

**Current Mailing Address:**

524 NORTH FLORIDA AVE.  
DELAND, FL 32720 US

**New Mailing Address:**

FEI Number: 01-0927889

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SEACHRIST, NORMAN E II  
524 NORTH FLORIDA AVE.  
DELAND, FL 32720 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: CEO  
Name: SEACHRIST, NORMAN E II  
Address: 524 NORTH FLORIDA AVE.  
City-St-Zip: DELAND, FL 32720

Title: P  
Name: MERRILL, CHRISTINE S  
Address: 524 NORTH FLORIDA AVE.  
City-St-Zip: DELAND, FL 32720

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: NORMAN E. SEACHRIST, II

CEO

04/28/2011

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

\_\_\_\_\_  
Date