


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000013182
 1. Entity Name
NORTH SOUTH PLAZA, INC.



Principal Place of Business Mailing Address
1281 OLD DIXIE HWY **686 THIRD PLACE**
VERO BEACH, FL 32960 **VERO BEACH, FL 32962**



03272006 No Chg-P CRZE034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
59-3363013 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
BOBBY J HIERS
686 3RD PLACE
VERO BEACH, FL 32962

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HIERS, BOBBY J
STREET ADDRESS	686 3RD PLACE
CITY-ST-ZIP	VERO BEACH, FL
TITLE	ST
NAME	GIANOTTI, SHELLY R
STREET ADDRESS	2230 80TH CT
CITY-ST-ZIP	VERO BEACH, FL
TITLE	V
NAME	FOWLER, KELLY K
STREET ADDRESS	2235 80TH CT
CITY-ST-ZIP	VERO BEACH, FL
TITLE	D
NAME	HOCKENHULL, STACY A
STREET ADDRESS	715 36TH AVE
CITY-ST-ZIP	VERO BEACH, FL
TITLE	D
NAME	BUTE, PAMELA
STREET ADDRESS	410 3RD LANE SW
CITY-ST-ZIP	VERO BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/13/06-80031-005 150.00

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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 supplementary 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 employed.

SIGNATURE: Bobby J Hiers 3-27-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #