

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S20833

FILED  
Feb 21, 2011  
Secretary of State

**Entity Name:** THE NATIONAL BUSINESS INSTITUTE OF FLORIDA, INC.

**Current Principal Place of Business:**

4950 RECKER HIGHWAY  
WINTER HAVEN, FL 33880 US

**New Principal Place of Business:**

**Current Mailing Address:**

1295 TERRELL MILL RD SE  
SUITE 104  
MARIETTA, GA 300679438 US

**New Mailing Address:**

**FEI Number:** 65-0279493

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SAPP, SHERRY D  
883 MEADOWLARK CT SE  
WINTER HAVEN, FL 33884 US

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

SAPP, SHERRY D MGR  
883 MEADOWLARK CT SE  
WINTER HAVEN, FL 33884 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: SHERRY D. SAPP

02/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MR.  
Name: LAVINSKY, MARK DIR.  
Address: 4950 RECKER HIGHWAY  
City-St-Zip: WINTER HAVEN, FL 33880

Title: MRS.  
Name: LAVINSKY, LAURIE B SEC.  
Address: 4950 RECKER HIGHWAY  
City-St-Zip: WINTER HAVEN, FL 33880

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: MARK LAVINSKY

PRES

02/21/2011

Electronic Signature of Signing Officer or Director

Date