

2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N10000006763

Entity Name: NH-ISAC, INC.

Current Principal Place of Business:

NASA/ AMF CENTER FOR SPACE EDUCATION
KENNEDY SPACE CENTER, FL 32899

Current Mailing Address:

AMF CENTER FOR SPACE EDUCATION
NASA KENNEDY SPACE CENTER
KENNEDY SPACE CENTER, FL , FL 32953 US

FEI Number: 27-4700010

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOBZA, DEBORAH
NASA/ AMF CENTER FOR SPACE EDUCATION
KENNEDY SPACE CENTER, FL 32899 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title D
Name ROUTH, JAMES
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title D
Name WAGNER, MICHAEL
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title D
Name KIRK, CHARLES
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title D
Name CHERNAVSKY, NIKOLAY
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title D
Name STEPHAN , REID
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title D
Name RICE, TERENCE
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title D
Name PRICE, FRANK
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title D
Name KADAKIA, JIGAR
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

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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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DEBORAH KOBZA

07/28/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OFFICER
Name SINGLETARY, JOSHUA D CIO
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title D
Name CALATAYUD, PAUL
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER, FL FL 32899

Title D
Name CINCERA, BRIAN
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title DIRECTOR
Name JOYCE, PATRICK
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title DIRECTOR
Name BARNES, GREGORY
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER, FL FL 32899

Title D
Name LARSON, JEANIE
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title D
Name SANFORD, BRAD
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title EXECUTIVE DIRECTOR
Name ANDERSON, DENISE
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER FL 32899

Title DIRECTOR
Name ARDONETTO, JOSEPH
Address NASA/ AMF CENTER FOR SPACE EDUCATION
City-State-Zip: KENNEDY SPACE CENTER, FL FL 32899