

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000002849

**FILED**  
**Jan 30, 2013**  
**Secretary of State**  
**CC5651457045**

**Entity Name:** THE NELSEN RESIDENCE INC.

**Current Principal Place of Business:**

2307 SE 15TH PLACE  
CAPE CORAL, FL 33990

**Current Mailing Address:**

P.O. BOX 151503  
CAPE CORAL, FL 33915 US

**FEI Number:** 65-0443152

**Certificate of Status Desired:** No

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

VALENTA, JEROME F  
2307 S.E. 15TH PLACE  
CAPE CORAL, FL 33990 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 P-D  
Name VALENTA, JEROME F  
Address 2307 S.E. 15TH PLACE  
City-State-Zip: CAPE CORAL FL 33990

Title V.P., D  
Name MONJI, GLADYS  
Address 2307 S.E. 15TH PLACE  
City-State-Zip: CAPE CORAL FL 33990

Title S-D  
Name CHAN, KWAN M  
Address 2307 S.E. 15TH PLACE  
City-State-Zip: CAPE CORAL FL 33990

Title D  
Name WILLIAMS, LENA  
Address 2307 S.E. 15TH PLACE  
City-State-Zip: CAPE CORAL FL 33990

Title D  
Name KNOX, EMILY  
Address 2307 S.E. 15TH PLACE  
City-State-Zip: CAPE CORAL FL 33990

*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:** JEROME F. VALENTA

**PRESIDENT**

**01/30/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date