

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H59159

**Entity Name:** NATURAL SYSTEMS ANALYSTS, INC.

**Current Principal Place of Business:**

201 W. CANTON AVE.  
SUITE C  
WINTER PARK, FL 32789

**Current Mailing Address:**

PO BOX 1598  
WINTER PARK, FL 32790

**FEI Number: 59-2535413**

**Certificate of Status Desired:** Yes

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

GOTTFRIED, PETER K.  
1841 CAROL LEE LANE  
WINTER PARK, FL 32789 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 PT  
Name GOTTFRIED, PETER K.  
Address 1841 CARROLLEE LANE  
City-State-Zip: WINTER PARK FL 32789

Title SECRETARY  
Name GOTTFRIED, CHRISTOPHER K  
Address 4108 CHERRYLAUREL LN  
City-State-Zip: WINSTON-SALEM NC 27106

*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: PETER K. GOTTFRIED

PRESIDENT

02/10/2017

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

\_\_\_\_\_ Date