

**2018 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	Title	SECRETARY
Name	GOTTFRIED, PETER K.	Name	GOTTFRIED, CHRISTOPHER K
Address	1841 CARROLLEE LANE	Address	4108 CHERRYLAUREL LN
City-State-Zip:	WINTER PARK FL 32789	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**

**01/16/2018**

Electronic Signature of Signing Officer/Director Detail

Date