

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000066037

**Entity Name:** NFZD CORP.**Current Principal Place of Business:**28120 HUNTERS RIDGE BLVD.  
UNIT #9  
BONITA SPRINGS, FL 34135**Current Mailing Address:**28120 HUNTERS RIDGE BLVD.  
UNIT #9  
BONITA SPRINGS, FL 34135 US**FEI Number:** 47-1551804**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	PRESIDENT
Name	NEIHEISER, WILLIAM N.
Address	28120 HUNTERS RIDGE BLVD. UNIT #9
City-State-Zip:	BONITA SPRINGS FL 34135

Title	VP, OPERATIONS
Name	FISHER, JARVIS
Address	28120 HUNTERS RIDGE BLVD. UNIT #9
City-State-Zip:	BONITA SPRINGS FL 34135

Title	TREASURER
Name	FIORE, NOELLE
Address	28120 HUNTERS RIDGE BLVD. UNIT #9
City-State-Zip:	BONITA SPRINGS FL 34135

Title	OTHER, PURCHASING MANAGER
Name	FIORE, ANDREW
Address	28120 HUNTERS RIDGE BLVD. UNIT #9
City-State-Zip:	BONITA SPRINGS FL 34135

*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:** WILLIAM N. NEIHEISER

PRESIDENT

02/20/2019

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