

2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30862

FILED
Feb 02, 2023
Secretary of State
6250025480CC

Entity Name: NATIONAL ASSOCIATION FOR SHOPLIFTING PREVENTION, INC.

Current Principal Place of Business:

33 WALT WHITMAN ROAD
SUITE 233W
HUNTINGTON STATION, NY 11746

Current Mailing Address:

33 WALT WHITMAN ROAD
SUITE 233W
HUNTINGTON STATION, NY 11746 US

FEI Number: 22-3010584

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BERLIN, PETER
2106 NW 60TH CIRCLE
BOCA RATON, FL 33496 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 DIRECTOR
Name LEVY, ROBERT
Address 33 WALT WHITMAN ROAD
 SUITE 233W
City-State-Zip: HUNTINGTON STATION NY 11746

Title DIRECTOR & SECRETARY
Name RUST, PETER
Address 33 WALT WHITMAN ROAD
 SUITE 233W
City-State-Zip: HUNTINGTON STATION NY 11746

Title DIRECTOR
Name BERLIN, PETER D
Address 33 WALT WHITMAN ROAD
 SUITE 233W
City-State-Zip: HUNTINGTON STATION NY 11746

Title DIRECTOR
Name BROMBERG, STEPHEN
Address 33 WALT WHITMAN ROAD
 SUITE 233W
City-State-Zip: HUNTINGTON STATION NY 11746

Title EXECUTIVE DIRECTOR
Name KOCHMANN, CAROLINE
Address 33 WALT WHITMAN ROAD
 SUITE 233W
City-State-Zip: HUNTINGTON STATION NY 11746

Title DIRECTOR
Name LAWRENCE, CRAIG
Address 33 WALT WHITMAN ROAD
 SUITE 233W
City-State-Zip: HUNTINGTON STATION NY 11746

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: CAROLINE KOCHMANN

EXECUTIVE DIRECTOR

02/02/2023

Electronic Signature of Signing Officer/Director Detail

Date