## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010540

Entity Name: NAMS NETWORK, INC.

Apr 14, 2017

**Secretary of State** CC2621711173

**FILED** 

# **Current Principal Place of Business:**

2820 SELWYN AVENUE SUITE 694

CHARLOTTE, NC 28209

## **Current Mailing Address:**

2820 SELWYN AVENUE **SUITE 694** 

CHARLOTTE, NC 28209 US

FEI Number: 27-3731123 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SAMMONS, ROBERT O 1556 SIXTH STREET SE WINTER HAVEN, FL 33880-4509 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:

**DIRECTOR** Title Title DIRECTOR

SHULER, JON Name Name JOHNSON, DREW

889 FIELDGATE CIRCLE Address 112 BERRY TREE LANE Address

City-State-Zip: PAWLEYS ISLAND SC 29585 City-State-Zip: PAWLEYS ISLAND SC 29585

Title **DIRECTOR** Title DIRECTOR

GORNIK, MARTIN Name CREIGHTON, RUSTY Name

Address 2355 LAKESHORE DRIVE NORTH Address 3380 SUTHERLAND DRIVE FLEMING ISLAND FL 32003

City-State-Zip: City-State-Zip: LEXINGTON KY 40517

Title DIRECTOR Name LEE, WEBBER Address P O BOX 2989

City-State-Zip: MURRELLS INLET SC 29576

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.

04/14/2017 DIRECTOR SIGNATURE: JON SHULER