

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 265081

Entity Name: NOZZLE NOLEN INC

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

5400 BROADWAY
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

5400 BROADWAY
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 59-0996741 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NOLEN, DAVID M
5400 BROADWAY
WESTPALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: NOLEN, DAVID MICHAEL
Address: 5400 BROADWAY
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VPD () Delete
Name: PIERCE, JOHN CPA
Address: 617 INLET WAY
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: ST () Delete
Name: NOLEN, KENNETH, E
Address: 5720 PARKE AVE
City-St-Zip: W PALM BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: NOLEN, DAVID M
Address: 5400 BROADWAY
City-St-Zip: WEST PALM BEACH, FL 33407

Title: () Change () Addition
Name: _____
Address: _____
City-St-Zip: _____

Title: ST (X) Change () Addition
Name: NOLEN, KENNETH E
Address: 5720 PARKE AVE
City-St-Zip: WEST PALM BEACH, FL 33407

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KENNETH E NOLEN

ST

04/21/2009

Electronic Signature of Signing Officer or Director

_____ Date