

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K37370

FILED
Jan 25, 2005
Secretary of State

Entity Name: NICKERSON BUSINESS SYSTEMS, INC.

Current Principal Place of Business:

2525 DRANEFIELD RD
SUITE 10
LAKELAND, FL 33811 US

New Principal Place of Business:

Current Mailing Address:

2525 DRANE FIELD RD
SUITE 10
LAKELAND, FL 33811 US

New Mailing Address:

FEI Number: 59-2912400 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NICKERSON, CONNIE
5237 NICHOLS DRIVE WEST
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

NICKERSON, CONNIE A
9004 IRBY LANE EAST
LAKELAND, FL 33811 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: CONNIE A. NICKERSON

01/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NICKERSON, CONNIE,
Address: 2525 DRANE FIELD RD STRE 10
City-St-Zip: LAKELAND, FL

Title: DV () Delete
Name: NICKERSON, RODNEY,
Address: 2525 DRANE FIELD RD STE 10
City-St-Zip: LAKELAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: NICKERSON, CONNIE A
Address: 2525 DRANE FIELD RD STRE 10
City-St-Zip: LAKELAND, FL 33811

Title: V/P (X) Change () Addition
Name: NICKERSON, RODNEY
Address: 2525 DRANE FIELD RD STE 10
City-St-Zip: LAKELAND, FL 33811

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CONNIE A. NICKERSON

PRES

01/25/2005

Electronic Signature of Signing Officer or Director

Date