2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

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Entity Name: ELOISE R. NELSON & ASSOCIATES, P.A.

Current Principal Place of Business:

800 VILLAGE SQUARE CROSSING
SUITE 219
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

800 VILLAGE SQUARE CROSSING
#331
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

800 VILLAGE SQUARE CROSSING
SUITE 219
PALM BEACH GARDENS, FL 33410

New Mailing Address:

800 VILLAGE SQUARE CROSSING
#331
PALM BEACH GARDENS, FL 33410

FEI Number: 01-0718044 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NELSON, ELOISE R
800 VILLAGE SQUARE CROSSING
SUITE 219
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

NELSON, ELOISE R
800 VILLAGE SQUARE CROSSING
#331
PALM BEACH GARDENS, FL 33410 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: 01/05/2011

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DSP
Name: NELSON, ELOISE R
Address: 800 VILLAGE SQUARE CROSSING, #331
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DTVP
Name: RILEY, H. WADE III
Address: 800 VILLAGE SQUARE CROSSING, #331
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: H WADE RILEY, III VP 01/05/2011

Electronic Signature of Signing Officer or Director — Date