2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000105490

Name:

Address: City-St-Zip: FILED Feb 16, 2009 Secretary of State

| Entity Nan | ne: NELCO DE | EVELOPMENT COMPANY | | | | |
|--|--|---|---|--|--------------------------------|---------|
| Current Pr | incipal Place | of Business: | New Princ | New Principal Place of Business: | | |
| 403 W DR TAMPA, FL | MLK JR BLVD 33603 | | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | |
| 403 W DR TAMPA, FL | MLK JR BLVD 33603 | | | | | |
| FEI Number: 59-3620880 FEI Number Applied For () FEI Nu | | | FEI Number Not Appl | umber Not Applicable () Certificate of Status Desired (X) | | |
| Name and | Address of Cu | ırrent Registered Agent: | Name and | Name and Address of New Registered Agent: | | |
| TAMPA, FL | MLK JR BLD 33603 US named entity su | ubmits this statement for the po | urpose of changing i | ts registered (| office or registered agent, or | · both, |
| SIGNATUR | RE: | | | | | |
| Election Can | | Signature of Registered Age Trust Fund Contribution (). | nt | | Date | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | PSTD () I NELSON, DANIE 403 W DR MLK . TAMPA, FL 3360 | IR BLVD | Title: Name: Address: City-St-Zip: | * | | |
| Title: Name: Address: City-St-Zip: | 1() | Delete | Title: Name: Address: City-St-Zip: | CFOP (NELSON, DAN 403 W DR MLI TAMPA, FL 33 | K JR BLVD | |
| Title: | 1() | Delete | Title: | COOV (|) Change (X) Addition | |

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.

Name:

Address:

City-St-Zip:

HALL, STEVE

TAMPA, FL 33603

403 W DR MLK JR BLVD

SIGNATURE: DANIEL NELSON CFOP 02/16/2009