

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003988

FILED
Feb 18, 2009
Secretary of State

Entity Name: NCCI HOLDINGS, INC.

Current Principal Place of Business:

901 PENINSULA CORPORATE CIRCLE
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

901 PENINSULA CORPORATE CIRCLE
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 52-2225042

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC
11380 PROSPERITY FARMS RD., #221E
PALM BEACH GARDENS, FL 33410 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

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: DELEHANTY, TERRENCE D CLO
Address: 901 PENINSULA CORPORATE CIRCLE
City-St-Zip: BOCA RATON, FL 33487

Title: TCFO () Delete
Name: GUERRA, ALFREDO
Address: 901 PENINSULA CORPORATE CIRCLE
City-St-Zip: BOCA RATON, FL 33487

Title: PCEO () Delete
Name: KLINGEL, STEPHEN J
Address: 901 PENINSULA CORPORATE CIRCLE
City-St-Zip: BOCA RATON, FL 33487

Title: CCO () Delete
Name: BUDD, CHERYL
Address: 901 PENINSULA CORPORATE CIRCLE
City-St-Zip: BOCA RATON, FL 33487

Title: GM () Delete
Name: DECESARI, JAMES
Address: 901 PENINSULA CORPORATE CIRCLE
City-St-Zip: BOCA RATON, FL 33487

Title: P () Delete
Name: WESTERVELT, HELEN
Address: 901 PENINSULA CORPORATE CIRCLE
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TCFO (X) Change () Addition
Name: GUERRA, ALFREDO T
Address: 901 PENINSULA CORPORATE CIRCLE
City-St-Zip: BOCA RATON, FL 33487

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

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERRENCE D. DELEHANTY

S

02/18/2009

Electronic Signature of Signing Officer or Director

Date