

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 401920

FILED
Jan 07, 2010
Secretary of State

Entity Name: O.R. COLAN ASSOCIATES, INC.

Current Principal Place of Business:

4651 CHARLOTTE PARK DRIVE
SUITE 440
CHARLOTTE, NC 28217

New Principal Place of Business:

Current Mailing Address:

4651 CHARLOTTE PARK DRIVE
SUITE 440
CHARLOTTE, NC 28217

New Mailing Address:

FEI Number: 59-1397236 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: SEC
Name: SHELTON, JOHN L
Address: 10401 TYNE COURT
City-St-Zip: CHARLOTTE, NC 28210

Title: TREA
Name: NASH, THOMAS J
Address: 8723 NW 82ND STREET
City-St-Zip: TAMARAC, FL 33321

Title: D
Name: MERRYMAN, ROBERT N
Address: 31 TOPPING LANE
City-St-Zip: ST. LOUIS, MO 63131

Title: PRES
Name: AMMAR, KAREN
Address: 1320 FUNSTON ST
City-St-Zip: HOLLYWOOD, FL 33019

Title: VP
Name: PLUTA, THEODORE M
Address: 650 BELLA VISTA COURT SOUTH
City-St-Zip: JUPITER, FL 33477

Title: CEO
Name: MUTH, CATHERINE C
Address: 4201 N. OCEAN DR., APT. 206
City-St-Zip: HOLLYWOOD, FL 33019

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: JOHN L. SHELTON

SECR

01/07/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date