## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 324730**

City-St-Zip:

SEBASTIAN, FL 32958

Entity Name: R.A. NIXON COMPANY

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
1680 14TH VERO BE	HAVE ACH, FL 3296	0 US		
Current Mailing Address:			New Mailing Address:	
1680 14TH VERO BC	H AVE. H, FL 32960	US		
FEI Number	: 59-1203305	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:
The above in the State	ACH, FL 3296 e named entity e of Florida.		purpose of changing its registered	d office or registered agent, or both,
SIGNATUI		nic Signature of Registered Ag	ent	 Date
Election Car		g Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD ( NIXON,PHILIP 7511 37TH ST. VERO BEACH,		Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	VD ( NIXON, PHILIP 1725 LAGOON SEBASTIAN, F	LANE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	ST ( NIXON,DONNA 7511 37TH ST. VERO BEACH,	•	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name:	D ( ) REDNER, MAR		Title: Name:	( ) Change ( ) 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.

City-St-Zip:

SIGNATURE: PHILIP A NIXON MR 04/30/2008