

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 438374

Entity Name: NELCO, INC.

FILED
Apr 05, 2006
Secretary of State

Current Principal Place of Business:

P.O. BOX 380042
MURDOCK, FL 339380042 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 380042
MURDOCK, FL 339380042 US

New Mailing Address:

FEI Number: 59-1485370 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORENCE P. REINHARDT
850 SILVER SPRINGS TERRACE
PORT CHARLOTTE, FL 33948 US

Name and Address of New Registered Agent:

KOVACK, CHRISTOPHER M
850 SILVER SPRINGS TERRACE
PORT CHARLOTTE, FL 33948 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: CHRISTOPHER M KOVACK 04/05/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REINHARDT, SHIRLEY D,
Address: 1129 B TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952,

Title: PD () Delete
Name: REINHARDT, FLORENCE, P
Address: 1129 B TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952,

Title: STD () Delete
Name: REINHARDT, SHIRLEY D,
Address: 1129 B TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952,

Title: D () Delete
Name: KOVACK, CHRISTOPHER
Address: 1129 B TAMIAMI TRL
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: REINHARDT, SHIRLEY D,
Address: 1129 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D (X) Change () Addition
Name: REINHARDT, FLORENCE, P
Address: 1129 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952, FL 33952

Title: P (X) Change () Addition
Name: REINHARDT, SHIRLEY D,
Address: 1129 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE,, FL 33952

Title: VP (X) Change () Addition
Name: KOVACK, CHRISTOPHER
Address: 1129 TAMIAMI TRL
City-St-Zip: PORT CHARLOTTE, FL 33952

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: CHRISTOPHER M KOVACK VP 04/05/2006

Electronic Signature of Signing Officer or Director Date