## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 441733**

Name: NORDOUIST DIFLECTRICS INC

FILED Jan 07, 2009 Secretary of State

Entity Nai	me: NORDQUIS	ST DIELECTRICS, INC.			
Current Principal Place of Business:			New Princ	New Principal Place of Business:	
12750 59T CLEARWA	H WAY N ATER, FL 33760	US			
Current Mailing Address:			New Mailing Address:		
12750 59T CLEARWA	H WAY N ATER, FL 33760	US			
FEI Number: 59-1496080 FEI Number Applied For ( )			FEI Number Not Applicable ( ) Certificate of Status Desired ( )		
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of New Registered Agent:	
3099 JODI PALM HAF	RBOR, FL 34684	l US			
	named entity sule of Florida.	bmits this statement for the p	urpose of changing i	its registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic	Signature of Registered Age	nt	Date	
Election Car	npaign Financing T	rust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PDC () D NORDQUIST THA 3099 JODI LANE PALM HARBOR, F	DDEUS E,	Title: Name: Address: City-St-Zip:	PDC (X) Change ( ) Addition NORDQUIST, THADDEUS E 3099 JODI LANE PALM HARBOR, FL 34684	
Title: Name: Address: City-St-Zip:	S () D LUCE, ANN N 14878 55TH WAY CLEARWATER, F	N	Title: Name: Address: City-St-Zip:	S (X) Change () Addition LUCE, ANN N 14878 55TH WAY N CLEARWATER, FL 33760	
Title: Name: Address: City-St-Zip:	V () D NORDQUIST, ERI 809 NORMANDY I CLEARWATER, F	C L ROAD	Title: Name: Address: City-St-Zip:	V (X) Change ( ) Addition NORDQUIST, ERIC L 809 NORMANDY ROAD CLEARWATER, FL 33764	
Title: Name: Address: City-St-Zip:	V () D HUBBELL, SOPHI 37511 LORENA A ZEPHYRHILLS, F	E A VE	Title: Name: Address: City-St-Zip:	V (X) Change ( ) Addition HUBBELL, SOPHIE A 37511 LORENA AVE ZEPHYRHILLS, FL 33541	
Title: Name: Address: City-St-Zip:	V () D LUCE, KEVIN T 14878 55TH WAY CLEARWATER, F	N	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: ANN N LUCE S 01/07/2009