

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 670645

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: NICKEL PLATE PROPERTIES, INC.

## Current Principal Place of Business:

2165 GULF TO BAY BLVD. #2  
CLEARWATER, FL 33765

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 5008  
CLEARWATER, FL 33758

## New Mailing Address:

FEI Number: 58-1399058

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAUSCH, MICHAEL C.  
2165 GULF TO BAY BLVD., #2  
CLEARWATER, FL 33765 US

## Name and Address of New Registered Agent:

INGERSOLL, ANDREW B  
2165 GULF TO BAY BLVD., #2  
CLEARWATER, FL 33765 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: ANDREW B. INGERSOLL

01/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RAUSCH, MICHAEL C  
Address: 2165 GULF TO BAY BLVD., #2  
City-St-Zip: CLEARWATER, FL 33765

Title: VP ( ) Delete  
Name: COOPER, BARBARA  
Address: 2165 GULF TO BAY BLVD., #2  
City-St-Zip: CLEARWATER, FL 33765

Title: D ( ) Delete  
Name: BOURDIN, NOEL  
Address: 2165 GULF TO BAY BLVD. #2  
City-St-Zip: CLEARWATER, FL 33765

Title: D ( ) Delete  
Name: DUBROW, ELI B  
Address: 2165 GULF TO BAY BLVD., #2  
City-St-Zip: CLEARWATER, FL 33765

Title: D ( ) Delete  
Name: SCHREIBER, KATHERINE  
Address: 2165 GULF TO BAY BLVD., #2  
City-St-Zip: CLEARWATER, FL 33765

Title: D ( ) Delete  
Name: SEXTON, DAVID  
Address: 2165 GULF TO BAY BLVD. #2  
City-St-Zip: CLEARWATER, FL 33765

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: INGERSOLL, ANDREW B  
Address: 2165 GULF TO BAY BLVD., #2  
City-St-Zip: CLEARWATER, FL 33765

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:

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

SIGNATURE: BARBARA COOPER

VP

01/14/2009

Electronic Signature of Signing Officer or Director

Date