2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# F01000003368

Entity Name: NIC HOLDING CORP.

Current Principal Place of Business:

25 MELVILLE PARK ROAD
STE 210
MELVILLE, NY 117470398

New Principal Place of Business:

25 MELVILLE PARK ROAD
SUITE 210
MELVILLE, NY 117470398

Current Mailing Address:

25 MELVILLE PARK ROAD
PO BOX 2937
MELVILLE, NY 117470398

New Mailing Address:

25 MELVILLE PARK ROAD
SUITE 210
MELVILLE, NY 117470398

FEI Number: 11-3577086 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PCD ( ) Delete
Name: BERNSTEIN, JAY H
Address: 26 PHEASANT RUN
City-St-Zip: OLD WESTBURY, NY 11568

Title: D ( ) Delete
Name: BERNSTEIN, GENE M
Address: 28 EAST 70 ST., APT 12
City-St-Zip: NEW YORK, NY 10021

Title: VCFO ( ) Delete
Name: RIPP, PETER J
Address: 192 BIBLE STREET
City-St-Zip: COS COB, CT 06807

Title: CC ( ) Delete
Name: LESSMANN, STEVEN A
Address: 260 ASHAROKEN AVENUE
City-St-Zip: NORTHPORT, NY 11768

Title: VPS ( ) Delete
Name: MCCONAGHY, ELIZABETH ANN
Address: 19 SAINT ANDREWS LANE
City-St-Zip: GLEN COVE, NY 11542

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: STEVEN A. LESSMAN CC 01/08/2009

Electronic Signature of Signing Officer or Director — Date