

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005313

FILED
Apr 19, 2006
Secretary of State

Entity Name: NANTUCKET ASSOCIATES, INC.

Current Principal Place of Business:

4700 NANTUCKET DRIVE
LILBURN, GA 30047

New Principal Place of Business:

Current Mailing Address:

4700 NANTUCKET DRIVE
LILBURN, GA 30047

New Mailing Address:

FEI Number: 58-1707517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLAUSON, CHRISTINA E
4115 INDIAN BAYOU NORTH
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

ZWARG, BERNARD A
4115 INDIAN BAYOU NORTH
DESTIN, FL 32541 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: BERNARD A. ZWARG

04/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: CLAUSON, CHRISTINA E
Address: 4700 NANTUCKET DRIVE
City-St-Zip: LILBURN, GA 30047

Title: VPT () Delete
Name: ZWARG, CARL L
Address: 4700 NANTUCKET DRIVE
City-St-Zip: LILBURN, GA 30047

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: CHRISTINA E. CLAUSON

PS

04/19/2006

Electronic Signature of Signing Officer or Director

Date