

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007694

FILED  
Jan 20, 2009  
Secretary of State

Entity Name: NORMAN ALBERT LIMITED CORP.

## Current Principal Place of Business:

257 N. FRONT STREET  
BELLEVILLE ON CANADA K8N 5E9,

## New Principal Place of Business:

257 NORTH FRONT STREET BELLEVILLE  
ONTARIO, FC K8N 5E9 CA

## Current Mailing Address:

POST OFFICE BOX 1208  
BELLEVILLE ON CANADA K8N 5E9,

## New Mailing Address:

POST OFFICE BOX 1208 BELLEVILLE  
ONTARIO, FC K8N 5E9 CA

FEI Number: 98-0052890

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRUNTON REGISTERED AGENTS, INC.  
4710 NW 2ND AVENUE  
SUITE 101  
BOCA RATON, FL 33431 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: D ( ) Delete  
Name: ALBERT, DAVID  
Address: 257 N. FRONT STREET  
City-St-Zip: BELLEVILLE ON CANADA K8N 5E9,

Title: P ( ) Delete  
Name: ALBERT, NORMAN  
Address: 257 N. FRONT STREET  
City-St-Zip: BELLEVILLE ON CANADA K8N 5E9,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ALBERT, DAVID  
Address: 257 NORTH FRONT STREET BELLEVILLE  
City-St-Zip: ONTARIO, FC K8N 5E9 CA

Title: P (X) Change ( ) Addition  
Name: ALBERT, NORMAN  
Address: 257 NORTH FRONT STREET BELLEVILLE  
City-St-Zip: ONTARIO, FC K8N 5E9 CA

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: DAVID ALBERT

D

01/20/2009

Electronic Signature of Signing Officer or Director

Date