

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # F55619 1. Entity Name NELSON FINANCIAL INDUSTRIES, INC.	
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Principal Place of Business % E. MARK NELSON 1495 WELLS RD. ORANGE PARK, FL 32073	Mailing Address % E. MARK NELSON 1495 WELLS RD. ORANGE PARK, FL 32073
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02022006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2137365 Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent NELSON, E. MARK 1495 WELLS RD. ORANGE PARK, FL 32073

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

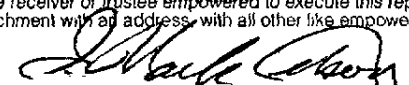
9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD NELSON, E. MARK 1495 WELLS ROAD ORANGE PARK, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD NELSON, CAROLYN S. 1495 WELLS ROAD ORANGE PARK, FL 00000,
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02/16/06-80002-020 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  E. MARK NELSON, PRESIDENT

2/2/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #