

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002662

FILED
Mar 13, 2009
Secretary of State

Entity Name: NOVA TECHNOLOGIES AN EMPLOYEE OWNED ENGINEERING COMPANY

Current Principal Place of Business:

429 SOUTH TYNDALL PKWY
SUITE S
PANAMA CITY, FL 32404

New Principal Place of Business:

Current Mailing Address:

429 SOUTH TYNDALL PKWY
SUITE S
PANAMA CITY, FL 32404

New Mailing Address:

FEI Number: 59-3425094

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARE, DIANE CPA
2589 JENKS AVE.
PANAMA CITY, FL 32405 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: PD () Delete
Name: BLACK III, JAMES A
Address: 5219 MELISSA DR
City-St-Zip: PANAMA CITY, FL

Title: VSD () Delete
Name: RUSHE, RANDALL G
Address: 136 POINTE OVERLOOK DR
City-St-Zip: CHAPIN, SC 29036

Title: CTD () Delete
Name: CALLOWAY, DAVID L
Address: 3466 SCOUT LAKE LANE
City-St-Zip: OVIEDO, FL 32765

Title: DV () Delete
Name: JOHNSON, BARTON R
Address: 14519 RIVIERA POINTE DRIVE
City-St-Zip: ORLANDO, FL 32828

Title: DP () Delete
Name: THOMAS, ALFRED
Address: 4002 SUNNYBROOK CT
City-St-Zip: ORLANDO, FL 32820

Title: C () Delete
Name: HAMMACK, VICKI L
Address: 719 PLANTATION CIR
City-St-Zip: PANAMA CITY, FL 32404

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
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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: VICKI L HAMMACK

C

03/13/2009

Electronic Signature of Signing Officer or Director

_____ Date