

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004955

Entity Name: N.O.M. PROPERTIES, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

250 WASHINGTON ST
PRATTVILLE, AL 36067

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 680176
PRATTVILLE, AL 36068

New Mailing Address:

FEI Number: 72-1397575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIEHN, ROLAND W
220 MCKENZIE AVE
PANAMA CITY, FL 32401 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: DV () Delete
Name: MCDONALD, MARK
Address: 3841 GREEN HILLS VILLAGE DR., #400
City-St-Zip: NASHVILLE, TN 37215

Title: DST () Delete
Name: OLDACRE, WILLIAM A JR.
Address: 3841 GREEN HILLS VILLAGE DR., #400
City-St-Zip: NASHVILLE, TN 37215

Title: DP () Delete
Name: NEWTON, THOMAS E
Address: 250 WASHINGTON ST.
City-St-Zip: PRATTVILLE, AL 36067

Title: D () Delete
Name: DUVA, VICTOR A
Address: 1209 ORANGE ST.
City-St-Zip: WILMINGTON, DE 19801

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:

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: THOMAS E NEWTON

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date