

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M42161

Entity Name: NANCY OKUN, INC.

**FILED**  
**Jan 13, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

13442 SW PEMBROKE CIRCLE N  
LAKE SUZY, FL 34269 US

**New Principal Place of Business:**

**Current Mailing Address:**

13442 SW PEMBROKE CIRCE N  
LAKE SUZY, FL 34269 US

**New Mailing Address:**

FEI Number: 59-2741958

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OKUN, NANCY  
13442 SW PEMBROKE CIR. N.  
LAKE SUZY, FL 34269 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: OKUN, NANCY,  
Address: 13422 SW PEMBROKE CIR. N.  
City-St-Zip: LAKE SUZY, FL 34269

Title: PD ( ) Delete  
Name: OKUN, NANCY  
Address: 13442 SW PEMBROKE CIRCLE N  
City-St-Zip: LAKE SUZY, FL 34269

**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 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: NANCY OKUN

PRES

01/13/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date