2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N07000004702

Entity Name: SOUTH FLORIDA NICKEL CITY CREW, INC.

Current Principal Place of Business:

4141 NW 5TH STREET
SUITE 100
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

4141 NW 5TH STREET
SUITE 100
PLANTATION, FL 33317

New Mailing Address:

P O BOX 101445
FORT LAUDERDALE, FL 33310

FEI Number: 20-8991595 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BENNETT, ROBERT M
4141 NW 5TH STREET
SUITE 100
PLANTATION, FL 33317 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

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: BENNETT, ROBERT M
Address: 4141 NW 5TH STREET, SUITE 100
City-St-Zip: PLANTATION, FL 33317

Title: D ( ) Delete
Name: AITCHESON, MICHAEL A
Address: 4141 NW 5TH STREET, SUITE 100
City-St-Zip: PLANTATION, FL 33317

Title: D ( ) Delete
Name: GALLIMORE, PEARL
Address: 4141 NW 5TH STREET
City-St-Zip: PLANTATION, FL 33317

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT M. BENNETT PRES 05/01/2009

Electronic Signature of Signing Officer or Director — Date