2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011936

Entity Name: OUR LITTLE NEST INC.

City-St-Zip:

VERO BEACH, FL 32962 US

FILED Mar 31, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 723 5TH PL SW VERO BEACH, FL 32962 LIS **Current Mailing Address: New Mailing Address:** 723 5TH PL SW 463 3RD LANE SW VERO BEACH, FL 32962US VERO BEACH, FL 32962US FEI Number: 56-2676826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALKER, BEATRICE A 723 5TH PL SW VERO BEACH, FL 32962 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WALKER, BEATRICE A Name: Name: 723 5TH PL SW Address: Address: City-St-Zip: VERO BEACH, FL 32962 US City-St-Zip: Title: () Delete Title: () Change () Addition ANDERSON, TARA Name: Name: Address: 1495 25TH CT SW Address: City-St-Zip: VERO BEACH, FL 32968 US City-St-Zip: Title: DIR () Delete Title: () Change () Addition HURST, KAREN Name: Name: Address: 2523 12TH SQ SW Address: City-St-Zip: VERO BEACH, FL 32968 US City-St-Zip: Title: DIR () Delete Title: () Change () Addition Name: ROBINSON, ANNA Name: 4570 42ND CIR Address: Address: City-St-Zip: VERO BEACH, FL 32967 US City-St-Zip: Title: DIR () Delete Title: () Change () Addition MICHAUD, FLORENCE Name: Name: 501 1ST ST, LOT 12 Address: Address:

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.

City-St-Zip:

SIGNATURE: BEATRICE A. WALKER P 03/31/2009