

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000064679

Entity Name: MALCOLM NICOL ENTERPRISES, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

85327 LINDSEY KAY CT
YULEE, FL 32097

New Principal Place of Business:

Current Mailing Address:

85327 LINDSEY KAY CT
YULEE, FL 32097

New Mailing Address:

FEI Number: 59-3669280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICOL, SHAUN
85327 LINDSEY KAY CT
YULEE, FL 32097 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: PT () Delete
Name: NICOL, SHAUN
Address: 267 S. FLETCHER AVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S (X) Delete
Name: NICOL, HEIDI
Address: 267 S. FLETCHER AVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VP () Delete
Name: LEWIS, MARK
Address: 2700 MIZELL AVE
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT,S (X) Change () Addition
Name: NICOL, SHAUN
Address: 85327 LINDSEY KAY CT
City-St-Zip: YULEE, FL 32097

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: LEWIS, MARK
Address: 2700 MIZELL AVE UNIT 701
City-St-Zip: FERNANDINA BEACH, FL 32034

I hereby certify that the information supplied with this filing does not qualify for the 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: SHAUN NICOL

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date