

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000073692

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: NEIMAN AND ASSOCIATES, INC.

**Current Principal Place of Business:**

239 SALVADOR SQUARE  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 140094  
ORLANDO, FL 32814

**New Mailing Address:**

FEI Number: 59-3663004

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NEIMAN, NORMAN  
239 SALVADOR SQUARE  
WINTER PARK, FL 32789 US

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

NEIMAN, NORMAN COO  
239 SALVADOR SQUARE  
WINTER PARK, FL 32789 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: NORMAN NEIMAN

03/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: COO ( ) Delete  
Name: NEIMAN, NORMAN  
Address: 239 SALVADOR SQUARE  
City-St-Zip: WINTER PARK, FL 32789

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: NORMAN NEIMAN

COO

03/20/2009

Electronic Signature of Signing Officer or Director

Date