

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000080846

FILED  
Apr 14, 2011  
Secretary of State

**Entity Name:** NESTEGGS RETIREMENT PLAN SERVICES, INC.

**Current Principal Place of Business:**

4745 SUTTON PARK COURT  
SUITE 202  
JACKSONVILLE, FL 322240253

**New Principal Place of Business:**

**Current Mailing Address:**

4745 SUTTON PARK COURT  
SUITE 202  
JACKSONVILLE, FL 322240253

**New Mailing Address:**

**FEI Number:** 59-3664112

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SLIMMON, CONSTANCE C  
14402 MARINA SAN PABLO PL, 803  
JACKSONVILLE, FL 322240826 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: P  
Name: SLIMMON, CONSTANCE C  
Address: 14402 MARINA SAN PABLO PL, 803  
City-St-Zip: JACKSONVILLE, FL 322240826

Title: VP  
Name: SLIMMON, ROBERT F  
Address: 14402 MARINA SAN PABLO PL, 803  
City-St-Zip: JACKSONVILLE, FL 322240826

I hereby 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 all other like empowered.

SIGNATURE: ROBERT F. SLIMMON

VP

04/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date