

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000071050

FILED
Jan 16, 2009
Secretary of State

Entity Name: NEXITY FINANCIAL SERVICES OF FLORIDA, INC.

Current Principal Place of Business:

5821 FAIRVIEW ROAD
SUITE 110
CHARLOTTE, NC 28209

New Principal Place of Business:

Current Mailing Address:

5821 FAIRVIEW ROAD
SUITE 110
CHARLOTTE, NC 28209

New Mailing Address:

FEI Number: 01-0608492 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
215 CELEBRATION PLACE
SUITE 500
ORLANDO, FL 34747 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: D () Delete
Name: LONG, DAVID
Address: 3500 BLUE LAKE DR, STE 330
City-St-Zip: BIRMINGHAM, AL 35243

Title: D () Delete
Name: LEE, GREG L
Address: 3500 BLUE LAKE DR, STE 330
City-St-Zip: BIRMINGHAM, AL 35243

Title: D () Delete
Name: MORAN, JOHN J
Address: 950 48TH AVENUE NORTH, SUITE 203
City-St-Zip: MYRTLE BEACH, SC 29577

Title: D&O () Delete
Name: MACKEY, WILL
Address: 5821 FAIRVIEW ROAD, SUITE 110
City-St-Zip: CHARLOTTE, NC 28209

Title: O () Delete
Name: PEDDY, BRENT
Address: 5821 FAIRVIEW ROAD, SUITE 110
City-St-Zip: CHARLOTTE, NC 28209

Title: O () Delete
Name: DOERFLINGER, DAVID
Address: 6831 GRAND AVENUE
City-St-Zip: KANSAS CITY, MO 64113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LONG, DAVID
Address: 3680 GRANDVIEW PARKWAY, SUITE 200
City-St-Zip: BIRMINGHAM, AL 35243

Title: D (X) Change () Addition
Name: LEE, GREG L
Address: 3680 GRANDVIEW PARKWAY, SUITE 200
City-St-Zip: BIRMINGHAM, AL 35243

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

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

SIGNATURE: JOHN J. MORAN

D

01/16/2009

Electronic Signature of Signing Officer or Director

_____ Date