

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jun 03, 2009  
Secretary of State**

DOCUMENT# P02000134312

Entity Name: NELLUMS CONSTRUCTION, INC.

**Current Principal Place of Business:**

2418 LANK RD  
MOLINO, FL 32577

**New Principal Place of Business:**

**Current Mailing Address:**

2418 LANK RD  
MOLINO, FL 32577

**New Mailing Address:**

FEI Number: 01-0759835

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NELLUMS, PHILLIP  
2418 LANK RD  
MOLINO, FL 32577 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: PSD ( ) Delete  
Name: NELLUMS, CARL PHILLIP  
Address: 2418 LANK RD  
City-St-Zip: MOLINO, FL 32577

Title: VD ( ) Delete  
Name: THURSTON, EDDIE F  
Address: 7549 BRICKYARD ROAD  
City-St-Zip: MOLINO, FL 32577

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

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

Title: V (X) Change ( ) Addition  
Name: NELLUMS, JOHN C  
Address: 125-A MOLINO ROAD  
City-St-Zip: MOLINO, FL 32577

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: PHILLIP NELLUMS

PSD

06/03/2009

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

\_\_\_\_\_  
Date