## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000107293

Entity Name: NCMCL, INC.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:			
SUITE 200			US		1511 N. WE SUITE 300		E BLVD. US	
,					,			
Current Mailing Address:					New Mailing Address:			
11300 4TH STREET NORTH SUITE 200					1511 N. WESTSHORE BLVD. SUITE 300			
SI. PETE	RSBURG, FL:	33/16	US		TAMPA, FL	_ 33607	US	
FEI Number:	: 20-0829207	FEI Nun	nber Applied For ( )	FEI Nur	nber Not Appli	icable ( )	Certificate of Status Desired ( )	
Name and	l Address of C	urrent R	egistered Agent:		Name and	Address o	of New Registered Agent:	
BLAIR COMMUNITIES, INC. 11300 4TH ST N STE 200 SAINT PETERSBURG, FL 33716 US					BALLAST POINT GROUP LLC 1511 N. WESTSHORE BLVD. SUITE 300 TAMPA, FL 33607 US			
	e named entity s e of Florida.	submits tl	nis statement for the p	ourpose o	f changing it	ts registere	d office or registered agent, or both,	
SIGNATURE: JULIE V. FANELLI					04/13/2009			
	Electron	ic Signat	ure of Registered Ag	ent			Date	
Election Car	mpaign Financing	g Trust Fui	nd Contribution ( ).					
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	DVS () SEMBLER, STE 11300 4TH STE ST. PETERSBU	REET NORT			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	DPT ( ) YOUNG, ROBE 526 BUTLER S WINDEMERE,	TREET	Js		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	V () FELICE, DAVID 11300 4TH STE SAINT PETERS	REET NOR	*		Title: Name: Address: City-St-Zip:	AS FANELLIE, 1511 N. WE TAMPA, FL	ESTSHORE BLVD. STE 300	
Title: Name: Address:	FANELLI, JULIE		NORTH SUITE 200		Title: Name: Address:		( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: ROBERT B. YOUNG P 04/13/2009

SAINT PETERSBURG, FL 33716

City-St-Zip: