2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# P03000128324

Entity Name: NILON INC.

Current Principal Place of Business:

4206 SHADY OAKS CT
SARASOTA, FL 34233

New Principal Place of Business:

4206 SHADY OAKS CT.
SARASOTA, FL 34233

Current Mailing Address:

4206 SHADY OAKS CT
SARASOTA, FL 34233

New Mailing Address:

4206 SHADY OAKS CT.
SARASOTA, FL 34233

FEI Number: 90-0126448 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NILON, SUSAN
4206 SHADY OAKS CT
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

NILON, SUSAN
4206 SHADY OAKS CT.
SARASOTA, FL 34233 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: _____ 05/04/2009
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: NILON, SUSAN
Address: 4206 SHADY OAKS CT
City-St-Zip: SARASOTA, FL 34233

Title: D ( ) Delete
Name: FERGUSON, DAVID D
Address: 4206 SHADY OAKS CT
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: NILON, SUSAN
Address: 4206 SHADY OAKS CT.
City-St-Zip: SARASOTA, FL 34233

Title: D (X) Change ( ) Addition
Name: FERGUSON, DAVID D
Address: 4206 SHADY OAKS CT.
City-St-Zip: SARASOTA, FL 34233

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: SUSAN NILON D 05/04/2009
Electronic Signature of Signing Officer or Director — Date