2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 20, 2008
Secretary of State

DOCUMENT# P04000033387

Entity Name: NATALIE NICHOLS GILLESPIE, INC

Current Principal Place of Business:

9490 WHISPER RIDGE TR
WEEKI WACHEE, FL 34613

New Principal Place of Business:

Current Mailing Address:

9490 WHISPER RIDGE TR
WEEKI WACHEE, FL 34613

New Mailing Address:

FEI Number: 20-0744107 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LODEN, SCOTT T
4601 CENTRAL AVENUE
ST PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

LODEN FRAZE & ASSOC PA
4601 CENTRAL AVENUE
ST PETERSBURG, FL 33713 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: SCOTT T LODEN 06/20/2008
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: P ( ) Delete
Name: GILLESPIE, NATALIE N
Address: 9490 WHISPER RIDGE TR
City-St-Zip: WEEKI WACHEE, FL 34613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NATALIE GILLESPIE P 06/20/2008
Electronic Signature of Signing Officer or Director Date