

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000087397

Entity Name: NUCLEAR PROVIDERS, INC.

FILED  
Feb 24, 2009  
Secretary of State

## Current Principal Place of Business:

1840 BOY SCOUT DRIVE  
FORT MYERS, FL 33907

## New Principal Place of Business:

32 TIMBERLAND CIRCLE N  
FORT MYERS, FL 33919 US

## Current Mailing Address:

1840 BOY SCOUT DRIVE  
UNIT A  
FORT MYERS, FL 33907

## New Mailing Address:

32 TIMBERLAND CIRCLE N  
FORT MYERS, FL 33919 US

FEI Number: 20-1202472

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BECKER, GEOFFREY  
1840 BOY SCOUT DRIVE  
UNIT A  
FORT MYERS, FL 33907 US

## Name and Address of New Registered Agent:

BECKER, GEOFFREY  
32 TIMBERLAND CIRCLE N  
FORT MYERS, FL 33919 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: GEOFFREY BECKER

02/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BECKER, GEOFFREY  
Address: 32 TIMBERLAND CIRCLE NORTH  
City-St-Zip: FORT MYERS, FL 33919

Title: VD ( ) Delete  
Name: MITCHELL, WILLIAM W  
Address: 205 HAYS FARM COURT  
City-St-Zip: GRAY, TN 37615

Title: V ( ) Delete  
Name: ARP, ALWN W  
Address: 206 HIDEEN FOREST CT  
City-St-Zip: JOHNSBOROUGH, TN 37658

Title: V ( ) Delete  
Name: PUTNAL, STEPHEN  
Address: 5430 RIVOLI DRIVE  
City-St-Zip: MACON, GA 31210

Title: S ( ) Delete  
Name: LARREA, MILTON  
Address: 5812 TALLONWOOD CIRCLE  
City-St-Zip: FORT MYERS, FL 33919

Title: T ( ) Delete  
Name: STEELE, JEFF  
Address: 11730 TIMBERLAND CIRCLE  
City-St-Zip: FORT MYERS, FL 33912

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: GEOFF BECKER

PD

02/24/2009

Electronic Signature of Signing Officer or Director

Date