

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000091046

FILED
Apr 29, 2009
Secretary of State

Entity Name: DARNELL, NOBLE & LORD COMPANY

Current Principal Place of Business:

2650 MCCORMICK DR
SUITE 180
CLEARWATER, FL 33759

New Principal Place of Business:

10079 BENT TREE LN
FISHERS, IN 46037

Current Mailing Address:

2650 MCCORMICK DR
SUITE 180
CLEARWATER, FL 33759

New Mailing Address:

10079 BENT TREE LN
FISHERS, IN 46037

FEI Number: 20-1243831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DARNELL, ALAN D
5457 MIRA VISTA DR
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

FISHMAN, STEVEN M
2454. MCMULLEN BOOTH RD
#D-607
CLEARWATER, FL 33759 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: STEVEN M FISHMAN

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: DARNELL, ALAN D
Address: 5457 MIRA VISTA DRIVE
City-St-Zip: PALM HARBOR, FL 34685

Title: ST () Delete
Name: DARNELL, PATRICIA A
Address: 5457 MIRA VISTA DRIVE
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DARNELL, ALAN D
Address: 10079 BENT TREE LN
City-St-Zip: FISHERS, IN 46037

Title: ST (X) Change () Addition
Name: DARNELL, PATRICIA A
Address: 10079 BENT TREE LN
City-St-Zip: FISHERS, IN 46037

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: ALAN D. DARNELL

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date