2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P04000154037

Entity Name: N. C. WEALTH MANAGMENT CORP.

Current Principal Place of Business:

2295 S. HIAWASSEE ROAD
SUITE 408
ORLANDO, FL 32835 US

New Principal Place of Business:

750 REFLECTIONS LANE
WINTER GARDEN, FL 34787 US

Current Mailing Address:

2295 S. HIAWASSEE RD.
SUITE 408
ORLANDO, FL 32835 US

New Mailing Address:

750 REFLECTIONS LANE
WINTER GARDEN, FL 34787 US

FEI Number: 20-1876813 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURDEN, NICHOLAS A
2295 S. HIAWASSEE ROAD
SUITE 408
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

BURDEN, NICHOLAS A
750 REFLECTIONS LANE
WINTER GARDEN, FL 34787 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: _____ 04/30/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BURDEN, NICHOLAS A
Address: 2295 S. HIAWASSEE ROAD, SUITE 408
City-St-Zip: ORLANDO, FL 32835 US

Title: VP ( ) Delete
Name: BURDEN, CHRISTOPHER
Address: 2295 S. HIAWASSEE ROAD SUITE 408
City-St-Zip: ORLANDO, FL 32835 US

Title: TREA ( ) Delete
Name: REYNOLDS, MARY
Address: 2295 S. HIAWASSEE ROAD SUITE 408
City-St-Zip: ORLANDO, FL 32835 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BURDEN, NICHOLAS A
Address: 750 REFLECTIONS LANE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: VP (X) Change ( ) Addition
Name: BURDEN, CHRISTOPHER
Address: 5318 SPRING RUN AVE
City-St-Zip: ORLANDO, FL 32819 US

Title: TREA (X) Change ( ) Addition
Name: REYNOLDS, MARY
Address: 750 REFLECTIONS LANE
City-St-Zip: WINTER GARDEN, FL 34787 US

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: NICHOLAS BURDEN P 04/30/2008
Electronic Signature of Signing Officer or Director — Date