2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# P04000158994

Entity Name: NAN ENTERPRISES, INC.

Current Principal Place of Business:

1096 RAINER DRIVE
SUITE B
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

1255 BELLE AVE.
SUITE 136
WINTER SPRINGS, FL 32708

Current Mailing Address:

2105 RIDGEWIND WAY
WINDERMERE, FL 34786

New Mailing Address:

1255 BELLE AVE.
SUITE 136
WINTER SPRINGS, FL 32708

FEI Number: 20-1920726 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LANE, MARY ANNE
2105 RIDGEWIND WAY
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LANE, MARY ANNE
Address: 2105 RIDGEWIND WAY
City-St-Zip: WINDERMERE, FL 34786

Title: VP ( ) Delete
Name: LANE, MARY ANNE
Address: 2105 RIDGEWIND WAY
City-St-Zip: WINDERMERE, FL 34786

Title: S ( ) Delete
Name: LANE, MARY ANNE
Address: 2105 RIDGEWIND WAY
City-St-Zip: WINDERMERE, FL 34786

Title: T ( ) Delete
Name: LANE, MARY ANNE
Address: 2105 RIDGEWIND WAY
City-St-Zip: WINDERMERE, FL 34786

Title: D ( ) Delete
Name: LANE, MARY ANNE
Address: 2105 RIDGEWIND WAY
City-St-Zip: WINDERMERE, FL 34786

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:

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: MARY ANNE LANE P 03/23/2009
Electronic Signature of Signing Officer or Director — Date