2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000072874

Entity Name: NICK OF TIME DELIVERY SERVICE, INC.

FILED Apr 21, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5771 MINING TERRACE RD. 5800 BEACH BLVD SUITE 104 SUITE 203-328

JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32207

Current Mailing Address: New Mailing Address:

5711 BOWDEN RD 5800 BEACH BLVD SUITE 15 PMB 325 SUITE 203-328

JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32207

FEI Number: 61-1488530 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SCARBOROUGH, DIANA Q
6549 LOU DR SOUTH
4395 COTTON GIN CT
JACKSONVILLE, FL 32216 US
MIDDLEBURG, FL 32068 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: 04/21/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: SCARBOROUGH, DIANA Q

Address: 5711 BOWDEN RD - SUITE 15 PMB 325

City-St-Zip: JACKSONVILLE, FL 32216

Title: S/T () Delete
Name: SCARBOROUGH, MARK D
Address: 9990 HAWKS HOLLOW RD

Name: SCARBOROUGH, MARK D Address: 9990 HAWKS HOLLOW RD. City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P/D
 (X) Change () Addition

 Name:
 SCARBOROUGH, DIANA Q

 Address:
 5800 BEACH BLVD STE 203-328

 City-St-Zip:
 JACKSONVILLE, FL 32207

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: DIANA Q. SCARBOROUGH P/D 04/21/2008