

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000079872

Entity Name: NICE PEOPLE INC.

FILED  
Apr 11, 2008  
Secretary of State

**Current Principal Place of Business:**

3 SANTA LUCIA AVE  
ORMOND BCH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

3 SANTA LUCIA AVE  
ORMOND BCH, FL 32174

**New Mailing Address:**

FEI Number: 59-3537838

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

POWERS, JIM  
3 SANTA LUCIA AVE  
ORMOND BCH, FL 32174 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: PRES ( ) Delete  
Name: POWERS, JAMES M  
Address: 3 SANTA LUCIA AVE  
City-St-Zip: ORMOND BEACH, FL 32174 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: JAMES M POWERS

PRES

04/11/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date