

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000122972

FILED
Jan 06, 2009
Secretary of State

Entity Name: NATIONWIDE DISTRIBUTING, INC.

Current Principal Place of Business:

3301 SE SLATER STREET
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

3301 SE SLATER STREET
STUART, FL 34997

New Mailing Address:

FEI Number: 20-3446023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMBROS, GEORGE
3301 SE SLATER STREET
STUART, FL 34997 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: PV () Delete
Name: LAMBROS, GEORGE
Address: 762 SW LONG LAKE CT
City-St-Zip: PALM CITY, FL 34990

Title: ST () Delete
Name: RADCLIFF, TRACY
Address: 4030 SE BARCELONA
City-St-Zip: STUART, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: RADCLIFF, TRACY
Address: 4037 SE BARCELONA ST
City-St-Zip: STUART, FL 34667

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: GEORGE LAMBROS

P

01/06/2009

Electronic Signature of Signing Officer or Director

Date