

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000136052

Entity Name: TRACY NIELSEN, INC.

FILED
Jan 14, 2008
Secretary of State

Current Principal Place of Business:

1332 CRANE CREST WAY
ORLANDO, FL 32825

New Principal Place of Business:

739 SPRING ISLAND WAY
ORLANDO, FL 32828

Current Mailing Address:

1332 CRANE CREST WAY
ORLANDO, FL 32825

New Mailing Address:

739 SPRING ISLAND WAY
ORLANDO, FL 32828

FEI Number: 20-3634985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIELSEN, TRACY
1332 CRANE CREST WAY
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

NIELSEN, TRACY
739 SPRING ISLAND WAY
ORLANDO, FL 32828 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: TRACY NIELSEN

01/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: NIELSEN, TRACY
Address: 1332 CRANE CREST WAY
City-St-Zip: ORLANDO, FL 32825

Title: VP/T () Delete
Name: NIELSEN, TRACY
Address: 1332 CRANE CREST WAY
City-St-Zip: ORLANDO, FL 32825

Title: S () Delete
Name: NIELSEN, TRACY
Address: 1332 CRANE CREST WAY
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: NIELSEN, TRACY
Address: 739 SPRING ISLAND WAY
City-St-Zip: ORLANDO, FL 32828

Title: VP/T (X) Change () Addition
Name: NIELSEN, TRACY
Address: 739 SPRING ISLAND WAY
City-St-Zip: ORLANDO, FL 32828

Title: S (X) Change () Addition
Name: NIELSEN, TRACY
Address: 739 SPRING ISLAND WAY
City-St-Zip: ORLANDO, FL 32828

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: TRACY NIELSEN

MS.

01/14/2008

Electronic Signature of Signing Officer or Director

Date