

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000038648

FILED
Jan 20, 2009
Secretary of State

Entity Name: NULMAN MEDIATION SERVICES, INC.

Current Principal Place of Business:

5100 S. CLEVELAND AVE.
STE. 318 - PMB 391
FT MYERS, FL 339072191

New Principal Place of Business:

15880 SUMMERLIN RD.
STE. 300 - PMB 146
FT MYERS, FL 33908

Current Mailing Address:

5100 S. CLEVELAND AVE.
STE. 318 - PMB 391
FT MYERS, FL 339072191

New Mailing Address:

15880 SUMMERLIN RD.
STE. 300 - PMB 146
FT MYERS, FL 33908

FEI Number: 33-1135288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRETT, JAY A
9100 COLLEGE POINTE CT
FT MYERS, FL 33919 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: DPS () Delete
Name: NULMAN, JAMES L
Address: 5100 S CLEVELAND AVE - STE 318 - PMB 391
City-St-Zip: FT MYERS, FL 339072191

Title: DVPT () Delete
Name: NULMAN, PAMELA L
Address: 5100 S CLEVELAND AVE - STE 318 - PMB 391
City-St-Zip: FT MYERS, FL 339072191

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: NULMAN, JAMES L
Address: 15880 SUMMERLIN RD., STE. 300 - PMB 146
City-St-Zip: FT MYERS, FL 33908

Title: DVPT (X) Change () Addition
Name: NULMAN, PAMELA L
Address: 15880 SUMMERLIN RD., STE. 300 - PMB 146
City-St-Zip: FT MYERS, FL 33908

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 L. NULMAN

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date