

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000091011

FILED
Jul 21, 2009
Secretary of State

Entity Name: SYCAMORE GROUP NEM, INC.

Current Principal Place of Business:

1704 HALEY GLENN LANE
KNOXVILLE, TN 37920

New Principal Place of Business:

Current Mailing Address:

1704 HALEY GLENN LANE
KNOXVILLE, TN 37920

New Mailing Address:

FEI Number: 26-0737445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JONES, CARLOTTA
1195 20TH STREET
ORANGE CITY, FL 32763 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: MANGUM, MARK
Address: 1704 HALEY GLENN LANE
City-St-Zip: KNOXVILLE, FL 37920

Title: VP/D () Delete
Name: MANGUM, JENNIFER
Address: 1704 HALEY GLENN LANE
City-St-Zip: KNOXVILLE, FL 37920

Title: S () Delete
Name: MANGUM, JENNIFER
Address: 1704 HALEY GLENN LANE
City-St-Zip: KNOXVILLE, FL 37920

Title: T/D () Delete
Name: MANGUM, NICHOLAS
Address: 1704 HALEY GLENN LANE
City-St-Zip: KNOXVILLE, FL 37920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: MANGUM, MARK E
Address: 1704 HALEY GLENN LANE
City-St-Zip: KNOXVILLE, FL 37920

Title: VP/D (X) Change () Addition
Name: MANGUM, JENNIFER L
Address: 1704 HALEY GLENN LANE
City-St-Zip: KNOXVILLE, FL 37920

Title: S (X) Change () Addition
Name: MANGUM, JENNIFER L
Address: 1704 HALEY GLENN LANE
City-St-Zip: KNOXVILLE, FL 37920

Title: T/D (X) Change () Addition
Name: MANGUM, NICHOLAS E
Address: 1704 HALEY GLENN LANE
City-St-Zip: KNOXVILLE, FL 37920

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: MARK MANGUM

P

07/21/2009

Electronic Signature of Signing Officer or Director

_____ Date