

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000042668

Entity Name: NICK THE GREEK, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

10 DONNER RD
ATLANTIC BEACH, FL 32233

New Principal Place of Business:

Current Mailing Address:

12234 COUNTRY COVE CT.
JACKSONVILLE, FL 32225

New Mailing Address:

5663 GREENLAND RD
UNIT 2001
JACKSONVILLE, FL 32258

FEI Number: 26-3067480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KOUTROUMANOS, NICHOLAS
12234 COUNTRY COVE CT
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

KOUTROUMANOS, NICHOLAS
5663 GREENLAND RD
UNIT 2001
JACKSONVILLE, FL 32258 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: NICHOLAS KOUTROUMANOS

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KOUTROUMANOS, NICHOLAS
Address: 12234 COUNTRY COVE CT
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KOUTROUMANOS, NICHOLAS
Address: 5663 GREENLAND RD UNIT 2001
City-St-Zip: JACKSONVILLE, FL 32258

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: NICHOLAS KOUTROUMANOS

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date