## 2005 FOR PROFIT CORPORATION ANNUAL REPORT **FILED** Apr 22, 2005 08:00 AM Secretary of State DOCUMENT # P98000001943 1. Entity Name NIKKEL AND ASSOCIATES, INC. Principal Place of Business Mailing Address 1365 12 ST E. 1365 12 ST E. PALMETTO, FL 34221 PALMETTO, FL 34221 04192005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0879828 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent VANCE, BRIAN DO NOT WRITE 748 132ND ST. CIRCLE NE BRADENTON, FL 34212 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS TITLE NAME VANCE, BRIAN STREET ADDRESS 748 132ND ST. CIRCLE NE CITY-ST-ZIP BRADENTON, FL 34212 TITLE NAME VANCE, LINDA STREET ADDRESS 748 132ND CIRCLE AVE. CITY-ST-ZIP BRADENTON, FL 34212 TITLE NAME STREET ADDRESS CITY-ST-ZIP

U00000323849 04/22/05-80070-020 150.00

Applied For

Not Applican

\$8.75 Additional

Fee Required

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP