2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000003945

Entity Name: ROBERT NIELSEN, INC.

FILED Apr 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

218-A E. EAU GALLIE BLVD 4327 S. HWY 27

INDIAN HARBOUR BEACH, FL 32937 #162

CLERMONT, FL 34711

Current Mailing Address: New Mailing Address:

218-A E. EAU GALLIE BLVD 4327 S. HWY 27

INDIAN HARBOUR BEACH, FL 32937 #162

CLERMONT, FL 34711

FEI Number: 59-3553186 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NIELSEN, ROBERT A
218-A E. EAU GALLIE BLVD
4327 S. HWY 27

INDIAN HARBOUR BEACH, FL 32937 US #162 CLERMONT, FL 34711 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: 04/18/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: NIELSEN, ROBERT A
Address: 218-A E. EAU GALLIE BLVD Address: 4327 S. HWY 27 #162
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 City-St-Zip: CLERMONT, FL 34711

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: ROBERT A. NIELSEN P 04/18/2009