2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000050144

Entity Name: NICKEL BAIL BONDS, INC.

FILED Apr 20, 2006 Secretary of State

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

2641 AIRPORT ROAD S 2641 AIRPORT ROAD S

A-101 A-101

NAPLES, FL 34112 NAPLES, FL 34112 U

Current Mailing Address: New Mailing Address:

2641 AIRPORT ROAD S 650 HAPPY ACRES RD 8REVARD NC 28712 US

A-101 BREVARD, NC 28712 US NAPLES, FL 34112

FEI Number: 59-2198011 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:

CLIFTON, THOMAS S

2641 AIRPORT RD

NAPLES, FL 34112 US

CLIFTON, THOMAS Z P
2641 AIRPORT RD SO
A101

NAPLES, FL 34112 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: THOMAS Z. CLIFTON 04/20/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

BREVARD, NC 28712

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

BREVARD, NC 28712 US

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

Name:CLIFTON, THOMAS ZName:CLIFTON, THOMAS Z PAddress:2641 AIRPORT RD S A-101Address:2641 AIRPORT RD S A-101

City-St-Zip: NAPLES, FL 34112 US

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

 Name:
 CLIFTON, BARBARA
 Name:
 CLIFTON, BARBARA A S

 Address:
 650 HAPPY ACRES RD
 Address:
 650 HAPPY ACRES RD

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

City-St-Zip:

 Name:
 DONELAM, JOHN
 Name:
 DONELAM, JOHN VP

 Address:
 330 1ST AVE. S.
 Address:
 330 1ST AVE. S.

City-St-Zip: HENDERSONVILLE, NC 28792 City-St-Zip: HENDERSONVILLE, NC 28792 US

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS Z. CLIFTON P 04/20/2006