## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V20295

Entity Name: NORAM PRODUCTIONS, INC.

FILED Apr 21, 2009 Secretary of State

cipal Place of Business:

217 N. WESTMONTE DRIVE SUITE 3024

ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address: New Mailing Address:

217 N. WESTMONTE DRIVE 930 WILLISTON PARK PT SUITE 3024 LAKE MARY, FL 32746 US

ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-3113253 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:

CRISPELL, JOSEPH R NORAM PRODUCTIONS, INC. 217 N. WESTMONTE DR., #3024 ALTAMONTE SPRINGS, FL 32714 US CRISPELL, JOSEPH R NORAM PRODUCTIONS, INC. 930 WILLISTON PARK PT LAKE MARY, FL 32746 US

930 WILLISTON PARK PT

US

() Change () Addition

LAKE MARY, FL 32746

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: JOSEPH R CRISPELL 04/21/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CRISPELL, JOSEPH R
 Name:

 Address:
 1579 NORTHRIDGE LALE CIRCLE
 Address:

City-St-Zip: LONGWOOD, FL 32750 City-St-Zip:

 Title:
 CEOC () Delete
 Title:

 Name:
 BLANTON, TED L
 Name:

 Address:
 1093 PRESCOTT BLVD
 Address:

 City-St-Zip:
 DELTONA, FL 32738
 City-St-Zip:

Title: VSTD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BLANTON, DIANA
 Name:

 Address:
 1093 PRESCOTT BLVD
 Address:

 City-St-Zip:
 DELTONA, FL 32738
 City-St-Zip:

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: DIANA BLANTON VSTD 04/21/2009