

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2008
Secretary of State

DOCUMENT# F00000002160

Entity Name: NATIONAL RURAL TELECOMMUNICATIONS COOPERATIVE, INC.

Current Principal Place of Business:

2121 COOPERATIVE WAY, SUITE 500
HERNDON, VA 20171

New Principal Place of Business:

Current Mailing Address:

2121 COOPERATIVE WAY, SUITE 500
HERNDON, VA 20171

New Mailing Address:

FEI Number: 52-1477995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: PHILLIPS, BOB
Address: 2121 COOPERATIVE WAY
City-St-Zip: HERNDON, VA 20171

Title: CFO () Delete
Name: ABETZ, CHRISTOPHER
Address: 2121 COOPERATIVE WAY
City-St-Zip: HERNDON, VA 20171

Title: SVP () Delete
Name: BING, STEVE
Address: 2121 COOPERATIVE WAY
City-St-Zip: HERNDON, VA 20171

Title: SVP () Delete
Name: KOCH, MARY JANE
Address: 2121 COOPERATIVE WAY
City-St-Zip: HERNDON, VA 20171

Title: SVP () Delete
Name: HARVEY, JACK
Address: 2121 COOPERATIVE WAY
City-St-Zip: HERNDON, VA 20171

Title: CON () Delete
Name: GILMORE, TERRY
Address: 2121 COOPERATIVE WAY
City-St-Zip: HERNDON, VA 20171

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERRY GILMORE

CON

07/21/2008

Electronic Signature of Signing Officer or Director

_____ Date