2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000213

Entity Name: NRP FINANCIAL, INC.

FILED Jul 15, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
209 NORTH MAIN STREET BRYAN, OH 43506					
Current Mailing Address:			New Mailing Address:		
209 NORTH MAIN STREET BRYAN, OH 43506					
FEI Number:	34-1905835	FEI Number Applied For () FEI Num	nber Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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:					
		c Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CEO () I OBERLIN, EARL 209 NORTH MAII BRYAN, OH 435	N STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CD () E OBERLIN, EARL 209 NORTH MAII BRYAN, OH 435	N STREET	Title: Name: Address: City-St-Zip:	D (X) Change () Addition SMITH, CRAIG 34700 COAST HIGHWAY CAPISTRANO BEACH, CA 92624	
Title: Name: Address: City-St-Zip:	PS () [POWERS, JILL F 209 NORTH MAII BRYAN, OH 435	N STREET	Title: Name: Address: City-St-Zip:	D (X) Change () Addition FRANCIS, ROBERT 34700 COAST HIGHWAY CAPISTRANO BEACH, CA 92624	
Title: Name: Address: City-St-Zip:	COO () E HOFBAUER, THO 209 NORTH MAIN BRYAN, OH 435	DMAS W N STREET	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DARIAN, RICHARD 34700 COAST HIGHWAY CAPISTRANO BEACH, CA 92624	
Title: Name: Address: City-St-Zip:	TCFO () E HESS, STEPHEN 209 NORTH MAIN BRYAN, OH 435	N STREET	Title: Name: Address: City-St-Zip:	D (X) Change () Addition CARLSON, BRIAN 34700 COAST HIGHWAY CAPISTRANO BEACH, CA 92624	
Title: Name: Address: City-St-Zip:	D (X) I OBERLIN, PAULI 209 NORTH MAII BRYAN, OH 435	N STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: EARL CLIFFORD OBERLIN III CEO 07/15/2008