

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2006 8:00 am
Secretary of State

02-16-2006 90054 017 ***150.00

DOCUMENT # F02000005404
 1. Entity Name
 NETCO GOVERNMENT SERVICES, INC.



Principal Place of Business Mailing Address
 [Barcode] [Barcode]
 [Barcode] [Barcode]

2. Principal Place of Business 3. Mailing Address
 950 Blue Gentian Rd 950 Blue Gentian Rd
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 Suite 100 Suite 100
 City & State City & State
 Eagan Eagan, MN 55121
 Zip Country Zip Country
 55121 USA 55121 USA

(F 0 2 0 0 0 0 5 4 0 4 P)
 01112006 [Barcode] [Barcode]
 4. FEI Number Applied For
 41-1985546 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 NRAI SERVICES, INC.
 2731 EXECUTIVE PARK DRIVE
 SUITE 4
 WESTON, FL 33331

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00
 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	HELLER, JOHN	
STREET ADDRESS	6100 WEST 110TH STREET	
CITY-ST-ZIP	BLOOMINGTON, MN 55438	
TITLE	CFO	<input type="checkbox"/> Delete
NAME	WILLIAMS, KARL	
STREET ADDRESS	6100 WEST 110TH STREET	
CITY-ST-ZIP	BLOOMINGTON, MN 55438	
TITLE	S	<input type="checkbox"/> Delete
NAME	GRAY, LISA A	
STREET ADDRESS	6100 WEST 110TH STREET	
CITY-ST-ZIP	BLOOMINGTON, MN 55438	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILLIAMS, MICHAEL	
STREET ADDRESS	6100 WEST 110TH STREET	
CITY-ST-ZIP	BLOOMINGTON, MN 55438	
TITLE	D	<input type="checkbox"/> Delete
NAME	SWIMM, KENNETH	
STREET ADDRESS	6100 WEST 110TH STREET	
CITY-ST-ZIP	BLOOMINGTON, MN 55438	
TITLE	D	<input type="checkbox"/> Delete
NAME	TESSLER, LENARD	
STREET ADDRESS	6100 WEST 110TH STREET	
CITY-ST-ZIP	BLOOMINGTON, MN 55438	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	950 Blue Gentian Rd, #100	
STREET ADDRESS	Eagan, MN 55121	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	950 Blue Gentian Rd, #100	
STREET ADDRESS	Eagan, MN 55121	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	950 Blue Gentian Rd, #100	
STREET ADDRESS	Eagan, MN 55121	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	950 Blue Gentian Rd, #100	
STREET ADDRESS	Eagan, MN 55121	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	950 Blue Gentian Rd	
STREET ADDRESS	Eagan, MN 55121	
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John Heller
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date-time Phone #

ATTACHMENT

40014660

ATTACHMENT

DIRECTORS AND OFFICERS

1. Brad Gold -- Director
950 Blue Gentian Road
Eagan, Minnesota 55121

ATTACHMENT



40014660

950 Blue Gentian Road, Suite 100
Eagan, MN 55121
Telephone: 651-365-3000
Fax: 651.365.3001
www.netcogov.com

February 10, 2006

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: 2006 Annual Report
Netco Government Services, Inc.

Dear Sir or Madam:

On behalf of Netco Government Services, Inc., I enclose its 2006 Annual Report, together with filing fees in amount of \$150.00.

Please direct your response or inquiry to me at:

Netco Government Services, Inc.
950 Blue Gentian Road
Suite 100
Eagan, Minnesota 55121.

I may be reached by telephone at (651) 365-8865, or by facsimile transmission at (651) 365-3002.

Thank you for your attention and courtesies in this matter.

Sincerely,

A handwritten signature in black ink that reads "Shanna M. Salzman". The signature is written in a cursive, flowing style.

Shanna M. Salzman,
Associate Project Manager
Netco Government Services, Inc.