FILED
Jan 19, 2007 08:00 AM
Secretary of State

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F97000006385

1. Entity Name
TAE, INC.

Principal Place of Business	Mailing Address
4917 PROFESSIONAL CT. SUITE 105 RALEIGH, NC 27609	4917 PROFESSIONAL CT. SUITE 105 RALEIGH, NC 27609

DO NOT WRITE IN THIS SPACE

01122007 No Chg-P CR2E034 (11/05)

4. FEI Number
56-1951876
☐ Applied For
☐ 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

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 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
NAME	TALLEY, J M
STREET ADDRESS	4917 PROFESSIONAL CT., SUITE 105
CITY-ST-ZIP	RALEIGH, NC 27609
TITLE	VPS
NAME	TALLEY, RICHARD T
STREET ADDRESS	4917 PROFESSIONAL CT., STE 105
CITY-ST-ZIP	RALEIGH, NC 27609
TITLE	SEC
NAME	TALLEY, RICHARD T
STREET ADDRESS	4917 PROFESSIONAL CT, STE 105
CITY-ST-ZIP	RALEIGH, NC 27609
TITLE	TRES
NAME	TALLEY, J M
STREET ADDRESS	4917 PROFESSIONAL CT, STE 105
CITY-ST-ZIP	RALEIGH, NC 27609
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/22/07-80027-007 150.00

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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: _____ J. Michael Talley 01/15/2007 919-871-0744
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #