

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002079

Entity Name: NC VENTURES, INC.

FILED  
Apr 19, 2005  
Secretary of State

## Current Principal Place of Business:

4100 GREENBRIAR  
SUITE 180  
STAFFORD, TX 77477 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1068  
STAFFORD, TX 77497 US

## New Mailing Address:

FEI Number: 76-0576169

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NC RISK MANAGEMENT  
3300 UNIVERSITY #701  
CORAL SPRINGS, FL 33065 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HREBENAR, MICHAEL A  
Address: 4100 GREENBRIAR, SUITE 180  
City-St-Zip: STAFFORD, TX 77477

Title: VTD ( ) Delete  
Name: HREBENAR, JAMES M  
Address: 4100 GREENBRIAR, SUITE 180  
City-St-Zip: STAFFORD, TX 77477

Title: CD ( ) Delete  
Name: HREBENAR, POLLYANNE  
Address: 4100 GREENBRIAR, SUITE 180  
City-St-Zip: STAFFORD, TX 77477

Title: VSD ( ) Delete  
Name: HREBENAR, BRAD A  
Address: 4100 GREENBRIAR, SUITE 180  
City-St-Zip: STAFFORD, TX 77477

## 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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TRACY WEAKLEY

CFO

04/19/2005

Electronic Signature of Signing Officer or Director

Date