2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006336

Entity Name: THE ENCORE GROUP, INC.

FILED Jan 08, 2007 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
10740 THORNMINT RD SAN DIEGO, CA 92127					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
111 CLOVERLEAF DRIVE WINSTON SALEM, NC 27103					
FEI Number: 3	33-0399385	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:					
	Electronic	Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS	AND DIRECT	ORS:	ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PCD () E SNOW, RICHARI 10740 THORNMI SAN DIEGO, CA	NT RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E SIEMERS, KENN 10740 THORNMI SAN DIEGO, CA	NT RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () [VALENTE, LOUIS 111 CLOVERLEA WINSTON-SALEI	AF DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () [SANFORD, EDW 15464 HARROW POWAY, CA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E SANFORD, ALAN PO BOX 1345 BONITA, CA	Delete I	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD ()E HANES, ELDRID 111 CLOVERLEA WINSTON-SALEI	AF DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: LOUIS R. VALENTE CFO 01/08/2007