2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000723

Entity Name: NETVERSANT NATIONAL, INC.

FILED Jan 04, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUITE 400	OAK BLVD. , TX 77056				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
SUITE 400	OAK BLVD. , TX 77056				
FEI Number:	76-0644454	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
CAPITOL CORPORATE SERVICES, INC. 1333 NORTH DUVAL STREET TALLAHASSEE, FL 32303 US					
The above in the State		submits this statement for the pur	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Agen	t	Date	
Election Cam	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FORDHAM, SC	BLVD., SUITE 400	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HALE, RONALE	BLVD., SUITE 400	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FIEDLER, WILI	BLVD., SUITE 400	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HARWELL, MIC	BLVD., SUITE 400	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MACCHI, ROBE	SW, SUITE 217	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ERKEL, RAYM	BLVD., SUITE 400	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 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: WILLIAM L. FIEDLER SD 01/04/2005