

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000881

FILED
Feb 21, 2008
Secretary of State

Entity Name: MEA1, INC.

Current Principal Place of Business:

5117 UNIVERSITY AVENUE
MADISON, WI 53705

New Principal Place of Business:

ONE ERDMAN PLACE
MADISON, WI 53717

Current Mailing Address:

P.O. BOX 5249
MADISON, WI 53705

New Mailing Address:

P.O. BOX 44975
MADISON, WI 53744

FEI Number: 39-2043580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAL SERVICES, INC.
526 E PARK AVE
TALLAHASSEE, FL 32301 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: ASCHENBRENNER, THOMAS
Address: 5117 UNIVERSITY AVENUE
City-St-Zip: MADISON, WI 53705

Title: PD () Delete
Name: HELIN, KURTIS
Address: 5117 UNIVERSITY AVENUE
City-St-Zip: MADISON, WI

Title: D () Delete
Name: FLEHMER, PAUL
Address: 350 INTERLOCKEN BLVD., SUITE 350
City-St-Zip: BROOMFIELD, CO 80021

Title: ST () Delete
Name: WOYKE, ELI
Address: 5117 UNIVERSITY AVENUE
City-St-Zip: MADISON, WI 53705

Title: D () Delete
Name: BRAUCHT, DAVID W
Address: 5117 UNIVERSITY AVENUE
City-St-Zip: MADISON, WI

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP D (X) Change () Addition
Name: ASCHENBRENNER, THOMAS
Address: ONE ERDMAN PLACE
City-St-Zip: MADISON, WI 53717

Title: PD (X) Change () Addition
Name: HELIN, KURTIS
Address: ONE ERDMAN PLACE
City-St-Zip: MADISON, WI 53717

Title: VP D (X) Change () Addition
Name: SAUNDERS, SCOTT
Address: ONE ERDMAN PLACE
City-St-Zip: MADISON, WI 53717

Title: ST (X) Change () Addition
Name: WOYKE, ELI
Address: ONE ERDMAN PLACE
City-St-Zip: MADISON, WI 53717

Title: VP D (X) Change () Addition
Name: MYERS, GEORGE
Address: ONE ERDMAN PLACE
City-St-Zip: MADISON, WI 53717

I hereby certify that the information supplied with this filing does not qualify 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: KURTIS HELIN

P

02/21/2008

Electronic Signature of Signing Officer or Director

_____ Date