2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003708

Entity Name: SAMPERS FINANCIAL, INC.

FILED Apr 23, 2007 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
79 MIDLAN MONTCLAI	D AVE. R, NJ 07042						
Current Mailing Address:				New Mailing Address:			
C/O, 500 W MADISON ST SUITE 2400 CHICAGO, IL 60661				C/O NFP, 500 W MADISON ST SUITE 2400 CHICAGO, IL 60661			
FEI Number:	13-4072125	FEI Number Applied For ()	FEI Num	nber Not Appli	icable ()	Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:		Name and	Address of N	ew Registered Agent:	
1200 SOUT	DRATION SYS TH PINE ISLANI DN, FL 33324						
The above in the State	named entity su of Florida.	ibmits this statement for the pur	rpose of	f changing it	s registered of	fice or registered agent, or both,	
SIGNATUR	E:						
	Electronic	Signature of Registered Agen	t			Date	
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS	AND DIRECT	ORS:		ADDITION	S/CHANGES	TO OFFICERS AND DIRECTORS	3:
Title: Name: Address: City-St-Zip:	CEO () E SAMPERS, ISIDO 79 MIDLAND AVE MONTCLAIR, NJ			Title: Name: Address: City-St-Zip:	, ,		
Title: Name: Address: City-St-Zip:	PTD () E SAMPERS, JOHN 79 MIDLAND AVE MONTCLAIR, NJ			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	S ()E SAMPERS, ANN 79 MIDLAND AVE MONTCLAIR, NJ			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	V ()E GOODMAN, PETI 79 MIDLAND AVE MONTCLAIR, NJ			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	V () E LIESER, LORI 500 W MADISON CHICAGO, IL 60			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () E ZUCCARO, ROBI 787 SEVENTH AV NEW YORK, NY	/E 11TH FLOOR		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: LORI M. LIESER VP 04/23/2007