2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005695

Entity Name: INFORMATION NETWORK ASSOCIATES, INC.

FILED Jan 16, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
5235 NO. FRONT ST. HARRISBURG, PA 17110	
Current Mailing Address:	New Mailing Address:
P.O. BOX 60515 HARRISBURG, PA 171060515	P.O. BOX 60515 HARRISBURG, PA 171060515 US
FEI Number: 23-2220525 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:
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 US	
The above named entity submits this statement for the in the State of Florida.	purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Ag	gent Date
Election Campaign Financing Trust Fund Contribution ().	

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: Title: (X) Change () Addition RYAN, BARRY W RYAN, BARRY W Name: Name: 1604 RED HILL RD. 1604 RED HILL RD. Address: Address: City-St-Zip: DAUPHIN, PA 17018 City-St-Zip: DAUPHIN, PA 17018 US Title: () Delete Title: (X) Change () Addition RYAN, DANIEL P RYAN, DANIEL P Name: Name: Address: Address: 1605 GAP VIEW ROAD 1605 GAP VIEW ROAD DAUPHIN, PA 17018 DAUPHIN, PA 17018 US City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: RYAN, MATTHEW F Name: RYAN, MATTHEW F Address: 575 LUCINDA LANE Address: 1530 DESTINY LANE City-St-Zip: MECHANICSBURG, PA 17055 City-St-Zip: DAUPHIN, PA 17018

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: DANIEL P. RYAN PT 01/16/2006