## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000002669

Entity Name: NATIONAL LAMBDARAIL, INC.

FILED Mar 21, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5757 PLAZA DR. STE 205 MR. THOMAS WEST, NATIONAL LAMBDARAIL, INC CYPRESS, CA 90630 **New Mailing Address: Current Mailing Address:** 5757 PLAZA DR, STE 205 MR. THOMAS WEST, NATIONAL LAMBDARAIL, INC CYPRESS, CA 90630 FEI Number: 37-1470984 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 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BLYTHE, ERVING Name: Name: 1700 KRAFT DR, STE 2000 Address: Address: City-St-Zip: BLACKSBURG, VA 24061 City-St-Zip: Title: ( ) Delete Title: () Change () Addition CONRAD, LARRY Name: Name: Address: 6102 UNIVERSITY CENTER, MS 2620 Address: City-St-Zip: TALLAHASSEE, FL 32306 City-St-Zip: Title: () Delete Title: () Change () Addition FUTHEY, TRACY Name: Name: 01 ALLEN BLDG, BOX 9009, DUKE UNIVERSITY Address: Address: City-St-Zip: DURHAM, NC 27708 City-St-Zip: Title: () Delete Title: () Change () Addition Name: JOHNSON, RONALD Name: 240 GERBERDING HALL Address: Address: City-St-Zip: SEATTLE, WA 98195 City-St-Zip: Title: () Delete Title: () Change () Addition VAN HOUWELING, DOUGLAS Name: Name: 3025 BOARDWALK, STE 200 Address: Address: City-St-Zip: ANN ARBOR, MI 48108 City-St-Zip: Title: () Delete Title: () Change () Addition SILVESTER, JOHN Name: Name: Address: UNIV OF SO CA, UNIVERSITY PARK, MC 2571 Address: LOS ANGELES, CA 900892571 City-St-Zip: City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS WEST PRES 03/21/2005