

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006879

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: NATIONAL EMPLOYERS COUNCIL, INC.

## Current Principal Place of Business:

11 SANDPIPER COVE  
PONTE VERDRA, FL 32082

## New Principal Place of Business:

## Current Mailing Address:

241 W FAYETTE ST  
SYRACUSE, NY 13202

## New Mailing Address:

FEI Number: 16-1184643      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RADE, JOHN W  
11 SANDPIPER COVE  
PONTE VERDRA, FL 32082      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: MR ( ) Delete  
Name: FRANK, DONALD  
Address: 5014 82ND WAY EAST  
City-St-Zip: SARASOTA, FL 34243

Title: PT ( ) Delete  
Name: RADE, JOHN W  
Address: 236 WHITESTONE CIRCLE  
City-St-Zip: SYRACUSE, NY 13215

Title: VPS ( ) Delete  
Name: FLETCHER, CHRISTOPHER T  
Address: 4848 GLINDEN LANE  
City-St-Zip: SYRACUSE, NY 13215

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOHN W RADE

PT

01/15/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date