## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000004534

FILED Apr 14, 2008 Secretary of State

Entity Name: U.S. BORDER CONTROL FOUNDATION INC

Current F	rincipal Plac	e of Business:	New Principal Plac	e of Business:
	ENSBORO D VA 22102	RIVE #1070		
Current Mailing Address:		New Mailing Address:		
	ENSBORO D VA 22102	RIVE #1070		
FEI Numbei	: 20-4417736	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
3900 N O LAUDERI The above		SEA, FL 33308 US	purpose of changing its register	red office or registered agent, or both,
SIGNATU	RE:			
SIGNATU		nic Signature of Registered A	gent	Date
SIGNATU <b>OFFICER</b>				Date GES TO OFFICERS AND DIRECTOR
OFFICER Fitle: Name: Address:	Electro S AND DIREC  CPT ( NELSON, EDV 3900 N OCEAN	CTORS: ) Delete VARD I		
OFFICER  Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	Electro S AND DIRECT CPT ( NELSON, EDV 3900 N OCEAL FORT LAUDER V ( RUMIN, EDWA 4100 GALT OC	CTORS:  ) Delete VARD I N DR #3D RDALE, FL 33308  ) Delete	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTOR
OFFICER  Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	Electro  S AND DIRECT  CPT ( NELSON, EDV 3900 N OCEAI FORT LAUDER  V ( RUMIN, EDWA 4100 GALT OC FT LAUDERDA  D ( WINKLER, DA 2005 NE 17TH	Delete VARD I N DR #3D RDALE, FL 33308  ) Delete ARD R CEAN DR #1506 ALE, FL 33308  ) Delete	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition
	Electro  S AND DIRECT  CPT ( NELSON, EDW 3900 N OCEAI FORT LAUDER  V ( RUMIN, EDWA 4100 GALT OCE FT LAUDERDA  D ( WINKLER, DA 2005 NE 17TH FT LAUDERDA	Delete VARD I N DR #3D RDALE, FL 33308  ) Delete ARD R DEAN DR #1506 ALE, FL 33308  ) Delete N I TERRACE ALE, FL 33305  ) Delete RANK	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: Address: City-St-Zip:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition  ( ) Change ( ) Addition

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

SIGNATURE: EDWARD I NELSON CPT 04/14/2008