## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F08000004638

FILED Apr 28, 2009 Secretary of State

Entity Name: PIRG NEW VOTERS PROJECT, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	ER STREET , MA 02108			
Current Mailing Address:		New Mailing Address:		
	ER STREET , MA 02108			
El Numbe	r: 22-2505821	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ( )
lame an	d Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
26 E PA	L, BRAD RK AVE ASSEE, FL 323	01 US		
	o namod ontity	submits this statement for the	ournose of changing its registere	nd office or registered agent, or both
he abov	e named entity : te of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or bot
he abov	te of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or bot
he abov	te of Florida. JRE:	submits this statement for the particular sta		ed office or registered agent, or bot  Date
he aboven the Star	te of Florida. JRE:	nic Signature of Registered Ag	ent	
he above the State	te of Florida.  JRE: Electror  RS AND DIREC  C () ROSENFELD, I 5439 SE RAYN	nic Signature of Registered Ag TORS: Delete DAVID IOND ST	ent	Date
he above the Stat	te of Florida.  JRE: Electror  S AND DIREC  C ( ) ROSENFELD, I 5439 SE RAYN PORTLAND, OI  VCT ( ) ALEXANDER, A 2648 EDGEWO	TORS:  Delete DAVID IOND ST R 97206  Delete AMBER DOD DRIVE, #3	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO
he above the Star IGNATU FFICER tle: ame: tdress: ty-St-Zip: tle: ame: ddress:	te of Florida.  JRE:  Electror  RS AND DIREC  C ()  ROSENFELD,  5439 SE RAYN  PORTLAND, OI  VCT ()  ALEXANDER, A  2648 EDGEWO  EUGENE, OR  C ()  MACDONALD,  30 R JAMAICA	TORS:  Delete DAVID HOND ST R 97206  Delete AMBER DOD DRIVE, #3 97409  Delete ANDREW ST	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  ES TO OFFICERS AND DIRECT( ( ) 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: DAVID ROSENFELD BM 04/28/2009