2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002920

Entity Name: NRAI SERVICES, INC.

FILED Jan 03, 2008 Secretary of State

Current Principal Place of Business:

New Principal Place of Business:

100 CANAL POINTE BLVD. SUITE 108 PRINCETON, NJ 08540

Current Mailing Address: New Mailing Address:

PO BOX 927 WEST WINDSOR, NJ 08550

FEI Number: 13-3837683 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:

GEC GROUP, LLC 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition Name: HOWARTH, DENNIS E Name:

 Name:
 HOWARTH, DENNIS E
 Name:

 Address:
 10 WOLF PACK CT.
 Address:

 City-St-Zip:
 HAMILTON, NJ 08619
 City-St-Zip:

Title: VTD () Delete Title: () Change () Addition

 Name:
 TARZIAN, DENNIS
 Name:

 Address:
 576 HIGHLAND AVENUE
 Address:

 City-St-Zip:
 RIDGEWOOD, NJ 07450
 City-St-Zip:

Title: VSD () Delete Title: () Change () Addition

 Name:
 BACLET, CHARLES
 Name:

 Address:
 2030 MAIN STREET
 Address:

 City-St-Zip:
 IRVINE, CA 92714
 City-St-Zip:

Title: AS () Delete Title: () Change () Addition

 Name:
 ASH, EILEEN
 Name:

 Address:
 644 GREENMAN COURT
 Address:

 City-St-Zip:
 SEAFORD, NY 11783
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 ROCKWELL, KENT
 Name:

 Address:
 10985 CODY STREET, SUITE 118
 Address:

 City-St-Zip:
 OVERLAND PARK, KS 66210
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 ROWELL, ROBERT K
 Name:

 Address:
 P.O. BOX 538
 Address:

 City-St-Zip:
 TOWNSHEND, VT 05353
 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: DENNIS E HOWARTH PD 01/03/2008