

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001281

Entity Name: NAPIER ASSOCIATES, INC.

FILED
Feb 23, 2005
Secretary of State

Current Principal Place of Business:

2A FOXHILL ROAD
CALIFON, NJ 07830

New Principal Place of Business:

Current Mailing Address:

2A FOXHILL ROAD
CALIFON, NJ 07830

New Mailing Address:

FEI Number: 22-2862405

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KORIZILUS, ERIK P.A.
2100 TAMIAMI TRAIL SUITE C
VENICE, FL 34293 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: D () Delete
Name: TOMS, NICHOLAS
Address: 154 WAVERLY PLACE
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: HILDEBRANDT, WILLIAM
Address: 2A FOXHILL ROAD
City-St-Zip: CALIFON, NJ 07830

Title: O () Delete
Name: MANSELL, ROBERT
Address: 403 BIRCH AVENUE
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TOMS, NICHOLAS PRES
Address: 154 WAVERLY PLACE
City-St-Zip: NEW YORK, NY 10022

Title: D (X) Change () Addition
Name: HILDEBRANDT, WILLIAM EVP
Address: 2A FOXHILL ROAD
City-St-Zip: CALIFON, NJ 07830

Title: O (X) Change () Addition
Name: MANSELL, ROBERT VP
Address: 403 BIRCH AVENUE
City-St-Zip: NOKOMIS, FL 34275

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

SIGNATURE: WILLIAM HILDEBRANDT

DIR

02/23/2005

Electronic Signature of Signing Officer or Director

_____ Date