2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000759

Entity Name: NATIONAL INCOME REALTY INVESTORS, INC.

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:			
423 WEST 55TH STREET 12TH FLOOR NEW YORK, NY 10019							
Current Mailing Address:			New Maili	New Mailing Address:			
	THRYN MANSF TICELLO AVE., X 75205						
FEI Number:	75-2401812	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	t		Date		
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	FRIEDMAN, WILL	STREET, 12TH FLOOR	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	PICKENS, ERIN I	LO AVE., STE. 200	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	MANSFIELD, KAT	O AVE., STE. 200	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	MINOR, TODD ${\bf C}$	street, 12TH FLOOR 10019	Title: Name: Address: City-St-Zip:	EVPT MINOR, TOE 3100 MONT DALLAS, TX	ICELLO AVE., STE. 200		
Title: Name: Address: City-St-Zip:	CLINTON, CHRIS	O AVE., STE. 200	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	RUBENSTEIN, CH	STREET, 12TH FLOOR	Title: Name: Address: City-St-Zip:		() 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.							

SIGNATURE: KATHRYN MANSFIELD EVPS 04/17/2008