

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006060

FILED
Jan 08, 2008
Secretary of State

Entity Name: NAVELLIER & ASSOCIATES, INC.

Current Principal Place of Business:

1 EAST LIBERTY, 3RD FLOOR
RENO, NV 89501

New Principal Place of Business:

Current Mailing Address:

1 EAST LIBERTY, 3RD FLOOR
RENO, NV 89501

New Mailing Address:

FEI Number: 88-0240393 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDES-FAULI CORPORATE SERVICES, INC.
777 SOUTH FLAGLER DR., SUITE 500 EAST
WEST PALM BEACH, FL 33401 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: PD () Delete
Name: NAVELLIER, LOUIS G
Address: 1 EAST LIBERTY, 3RD FLOOR
City-St-Zip: RENO, NV 89501

Title: D () Delete
Name: KUYER, ARJEN
Address: 1 EAST LIBERTY, 3RD FLOOR
City-St-Zip: RENO, NV 89501

Title: D () Delete
Name: BOYD, PAULA
Address: 1 EAST LIBERTY, 3RD FLOOR
City-St-Zip: RENO, NV 89501

Title: D () Delete
Name: BASSO, KEITH
Address: 1 EAST LIBERTY, 3RD FLOOR
City-St-Zip: RENO, NV 89501

Title: D () Delete
Name: O'LEARY, JAMES
Address: 1 EAST LIBERTY, 3RD FLOOR
City-St-Zip: RENO, NV 89501

Title: D () Delete
Name: KNAPP, PETER
Address: 1 EAST LIBERTY, 3RD FLOOR
City-St-Zip: RENO, NV 89501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: LOUIS NAVELLIER

PD

01/08/2008

Electronic Signature of Signing Officer or Director

_____ Date