

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008502

FILED
Jan 13, 2005
Secretary of State

Entity Name: THE MICRO AND NANOTECHNOLOGY COMMERCIALIZATION EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

160 WASHINGTON SE, M/S #47
ALBUQUERQUE, NM 87108

New Principal Place of Business:

Current Mailing Address:

160 WASHINGTON SE, M/S #47
ALBUQUERQUE, NM 87108

New Mailing Address:

FEI Number: 59-3688808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KEES, EJKEEL
Address: PO BOX 217
City-St-Zip: ENSCHEDE, THE NETHERLANDS,

Title: D () Delete
Name: WALSH, STEVEN
Address: 608 CEDAR HILL ROAD
City-St-Zip: ALBUQUERQUE, NM 87122

Title: D () Delete
Name: WARRINGTON, ROBERT
Address: 1105 12TH STREET
City-St-Zip: HOUGHTON, MI 49931

Title: T () Delete
Name: HIGDON, WILLIAM
Address: PO BOX 315
City-St-Zip: MOON, VA 23119

Title: D () Delete
Name: EDERS, JOB
Address: PO BOX 217
City-St-Zip: ENSCHEDE, THE NETHERLANDS, NJ 07102

Title: D () Delete
Name: STEELE, CAROL
Address: 140 7TH AVE. SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33701

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

SIGNATURE: WILLIAM HIGDON

TREA

01/13/2005

Electronic Signature of Signing Officer or Director

Date