2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005687

Current Principal Place of Business:

Entity Name: PROJECT NEHEMIAH, INC.

FILED May 28, 2007 Secretary of State

1017 AREZZO CIRCLE BOYNTON BEACH, FL 33436

Current Mailing Address: New Mailing Address:

1728 HAGUE AVENUE 120 LAKEVIEW DRIVE #2 315

SAINT PAUL, MN 55104 US WESTON, FL 33326 US

FEI Number: 30-0103239 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NEGASH, BETHELHEM G
1017 AREZZO CIRCLE
BOYNTON BEACH, FL 33436 US

NEGASH, BETHELHEM G
120 LAKEVIEW DRIVE
#315

WESTON, FL 33326 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: 05/28/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

New Principal Place of Business:

Title: D () Delete Title: () Change () Addition

 Name:
 NEGASH, BETHELHEM G D
 Name:

 Address:
 1017 AREZZO CIRCLE
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33436
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 ASSEGU, BEZA F T
 Name:

 Address:
 1643 SEATON LANE
 Address:

 City-St-Zip:
 ELGIN, IL 60123
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 BRITZIUS-NEGASH, SELENA S D
 Name:

 Address:
 112 CECIL ST. SE
 Address:

 City-St-Zip:
 MINNEAPOLIS, MN 55414
 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BETHELHEM G NEGASH D 05/28/2007