

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001125

FILED  
May 15, 2009  
Secretary of State

**Entity Name:** NATIONAL ENERGY RATERS ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

840 HELIOS AVENUE  
METAIRIE, LA 70005

**New Principal Place of Business:**

**Current Mailing Address:**

840 HELIOS AVENUE  
METAIRIE, LA 70005

**New Mailing Address:**

**FEI Number:** 59-3559709      **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:**

KETTLES, COLLEEN  
101 COVE LAKE DRIVE  
LONGWOOD, FL 32779      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: D/P ( ) Delete  
Name: RIPBERGER, KENNETH  
Address: 840 HELIOS AVENUE  
City-St-Zip: METAIRIE, LA 70005

Title: D/S ( ) Delete  
Name: KLAHN, ROBERT  
Address: 540 DAYTON STREET  
City-St-Zip: YELLOW SPRINGS, OH 45387

Title: DT ( ) Delete  
Name: MOULEDOUX, GABRIEL  
Address: 6585 WEURPEL STREET  
City-St-Zip: NEW ORLEANS, LA 70124

Title: D ( ) Delete  
Name: STROER, DENNIS  
Address: 417F COMMERCIAL COURT  
City-St-Zip: VENICE, FL 34292

Title: D ( ) Delete  
Name: KATZ, MYRON  
Address: 302 WALNUT  
City-St-Zip: NEW ORLEANS, LA 70118

Title: D ( ) Delete  
Name: LINN, DENNIS  
Address: 901 LAKESIDE DRIVE  
City-St-Zip: LAKE WORTH, FL 33460

**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:

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: KENNY RIPBERGER

D/P

05/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date