2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000001126

Entity Name: NATIONAL ENERGY RATING FOUNDATION, INCORPORATED

FILED Apr 12, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
	/A SPRINGS DD, FL 3277	ROAD, SUITE 187 9				
Current Mailing Address:			New Mailir	New Mailing Address:		
	'A SPRINGS DD, FL 3277	ROAD, SUITE 187 9				
FEI Number:	59-3559734	FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:		
KETTLES, 145 WEKIV LONGWOO	COLLEEN 'A SPRINGS DD, FL 3277	ROAD, SUITE 187 9				
The above in the State		submits this statement for the pu	rpose of changing it	s registered office or registered agent, or both,		
SIGNATUR				Data		
		nic Signature of Registered Agen		Date		
OFFICERS	AND DIREC	CTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D (STROER, DEI 230 DARTMOI VENICE, FL 3	UTH ROAD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D (FAIREY, PHIL 1679 CLEARL COCOA, FL 3	AKE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (MOYER, NEIL 1679 CLEARL COCOA, FL 3	AKE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (GLENN, PATT 3923 SW 180 NEWBERRY,	TH ST	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	JONES, PIER	ERRACE BLDG 242	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	GILMORE, TH	VOOD ROAD #233	Title: Name: Address: City-St-Zip:	S/D (X) Change () Addition KETTLES, COLLEEN 145 WEKIVA SPRINGS ROAD SUITE 187 LONGWOOD, FL 32779		

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: COLLEEN KETTLES S/D 04/12/2002

THOMAS GILMORE, DIRECTOR 1811 ENGLEWOOD ROAD #233 ENGLEWOOD, FL 34223

DREW SMITH, DIRECTOR 3801 BEE RIDGE ROAD #8 SARASOTA, FL 34233

MIKE VANBUREN, DIRECTOR 11339 RIVER ROAD LORTON, VA 22079

SUZANNE COOK, DIRECTOR 201 EAST PARK AVENUE TALLAHASSEE, FL 32301

LINDA PERRY, DIRECTOR 5250 GALAXIE DRIVE SUITE 1 JACKSON, MS 39206

MICHAEL HOLTZ, PRESIDENT 2540 FRONTIER AVENUE, SUITE 201 BOULDER, CO 80301