

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000041025

FILED  
Jan 18, 2007  
Secretary of State

Entity Name: GEOFFREY NATHAN CONSULTING INC.

## Current Principal Place of Business:

KERMODE HOUSE, PARLIAMENT STREET  
2ND FLOOR,  
RAMSEY, ISLE OF MAN, XX IM8 1AG XX

## New Principal Place of Business:

## Current Mailing Address:

KERMODE HOUSE, PARLIAMENT STREET  
2ND FLOOR,  
RAMSEY, ISLE OF MAN, XX IM8 1AG XX

## New Mailing Address:

FEI Number: 98-0233681

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: SD ( ) Delete  
Name: BREW, KAREN  
Address: EAST LOUGHLAN, JURBY EAST, JURBY  
City-St-Zip: ISLE OF MAN, XX IM7 1AG GB

Title: D ( ) Delete  
Name: CORDINGLEY, HOWARD  
Address: 9 GREENLAND'S PARK  
City-St-Zip: RAMSEY, ISLE OF MAN, XX IM8 2PG XX

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition  
Name: BREW, KAREN  
Address: EAST LOUGHLAN, JURBY EAST, JURBY  
City-St-Zip: ISLE OF MAN, XX IM7 1AG GB

Title: D (X) Change ( ) Addition  
Name: CORDINGLEY, HOWARD  
Address: 9 GREENLAND'S PARK  
City-St-Zip: RAMSEY, ISLE OF MAN, XX IM8 2PG XX

I hereby certify that the information supplied with this filing does not qualify for the 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: KAREN BREW

D

01/18/2007

Electronic Signature of Signing Officer or Director

Date