2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000087450

Address:

City-St-Zip:

570 TERMINAL DRIVE

NAPLES, FL 34104

Entity Name: RILEY ENTERPRISES OF N.P.R. INC.

FILED Mar 27, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
570 TERM NAPLES, I				
Current Mailing Address:			New Mailing Address:	
570 TERM NAPLES, I				
FEI Number	: 65-1040359	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
RILEY, KA 1753 BEAG ODESSA,	CHWAY LANE	JS		
	named entity : e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,
SIGNATUI	RE:			
	Electror	ic Signature of Registered Age	ent	Date
Election Car	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () RILEY, KATHR 1753 BEACHW ODESSA, FL 3	AY LANE	Title: (Name: Address: City-St-Zip:) Change ()Addition
Title: Name: Address: City-St-Zip:	VP () RILEY, MICHAI 570 TERMINAL NAPLES, FL 3	DRIVE	Title: (Name: Address: City-St-Zip:) Change ()Addition
Title: Name:	T () RILEY. JOSHU	Delete A	Title: (Name:) Change () Addition

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

Address:

City-St-Zip:

SIGNATURE: KATHRYN M RILEY P 03/27/2009