

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000089654

FILED
Apr 30, 2004
Secretary of State

Entity Name: NETWORK RESOURCES INTERNATIONAL, INC.

Current Principal Place of Business:

200 VISTA LANE
NAPLES, FL 34119

New Principal Place of Business:

241 MONTEREY DRIVE
NAPLES, FL 34119

Current Mailing Address:

200 VISTA LANE
NAPLES, FL 34119

New Mailing Address:

241 MONTEREY DRIVE
NAPLES, FL 34119

FEI Number: 59-3713589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRICKER, DAVID W
200 VISTA LANE
NAPLES, FL 34119

Name and Address of New Registered Agent:

TRICKER, DAVID W
241 MONTEREY DRIVE
NAPLES, FL 34119

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

04/30/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TRICKER, DAVID W
Address: 200 VISTA LANE
City-St-Zip: NAPLES, FL 34119

Title: D () Delete
Name: TRICKER, STACY M
Address: 200 VISTA LANE
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TRICKER, DAVID W
Address: 241 MONTEREY DRIVE
City-St-Zip: NAPLES, FL 34119

Title: D (X) Change () Addition
Name: TRICKER, STACY M
Address: 241 MONTEREY DRIVE
City-St-Zip: NAPLES, FL 34119

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

SIGNATURE: DAVID W. TRICKER

D

04/30/2004

Electronic Signature of Signing Officer or Director

Date