## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000061826

Entity Name: N & R FAMILY INVESTMENTS, INC.

FILED Jan 10, 2009 Secretary of State

Current Pri	incipal Place	of Business:	New Principal Pla	New Principal Place of Business:	
	OTH AVENUE CITY, FL 33328	3			
Current Mailing Address:			New Mailing Add	New Mailing Address:	
	OTH AVENUE CITY, FL 33328	3			
FEI Number: (	65-1139897	FEI Number Applied For()	FEI Number Not Applicable (	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Addres	ss of New Registered Agent:	
VIENS, NAI 4922 SW 90 COOPER C		3 US			
The above in the State		ubmits this statement for the p	urpose of changing its regist	tered office or registered agent, or both,	
SIGNATUR	E:				
	Electroni	c Signature of Registered Age	nt	Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PSTV () VIENS, NANCY 4922 SW 90TH A COOPER CITY,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () LAFFERTY, JAN 4966 SW 91 TEI COOPER CITY,	RR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () ROBERSON, AB 4960 SW 91 TEI COOPER CITY,	RR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MARTIN, RUBY 4922 SW 90 AV COOPER CITY,	E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () VIENS, MICHAE 4927 SW 90 AVI COOPER CITY,	E	Title: Name: Address: City-St-Zip:	( ) 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.

SIGNATURE: NANCY L. VIENS P 01/10/2009