2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000073458

Apr 28, 2008 Secretary of State

FILED

Entity Name: NORTHERN ALLIANCE INVESTMENT GROUP, INC.

Current Principal Place of Business: New Principal Place of Business: 4745 SUTTON PARK COURT BLDG 500, STE 501 JACKSONVILLE, FL 32224 **New Mailing Address: Current Mailing Address:** 4745 SUTTON PARK COURT BLDG 500, STE 501 JACKSONVILLE, FL 32224 FEI Number: 71-0894174 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: HURST, CHRISTOPHER J HURST, CHRISTOPHER J 4540 SOUTHSIDE BLVD 4776 HÓDGES BLVD, SUITE 206 SUITE 302 JACKSONVILLE, FL 32224 JACKSONVILLE, FL 32216 US 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: 04/28/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PVTS** () Delete Title: () Change () Addition TABB, JEFFREY E Name: Name: 4745 SUTTON PARK COURT BLDG 500 STE 501 Address: Address: City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: Title: Title: () Delete () Change () Addition Name: LENDRY, BRYAN J Name: 4745 SUTTON PARK COURT BLDG 500 STE 501 Address: Address: JACKSONVILLE, FL 32224 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition ANTZAKLIS, BETH Name: Name: 4745 SUTTON PARK COURT BLDG 500 STE 501 Address: Address: City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip:

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: BETH ANTZAKLIS D 04/28/2008