## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000144458

FILED Jan 09, 2008 Secretary of State

| Entity Na                                   | me: NATIGH   | RAYSON CORP.                           |   |   |    |  |
|---|--|--|---|---|----|--|
| Current Principal Place of Business:        |  |  | New Principal Place of Business:            |   |    |  |
| 323 LINDE<br>ELLENTO                        | EN DRIVE<br>N, FL 34222                                |  |   |   |    |  |
| Current Mailing Address:                    |  |  | New Mailing Address:                        |   |    |  |
| 323 LINDE<br>ELLENTO                        | EN DRIVE<br>N, FL 34222                                |  |   |   |    |  |
| FEI Number                                  | : 22-3917734   | FEI Number Applied For()               | FEI Number Not Applic                       | able ( ) Certificate of Status Desired ( )  |    |  |
| Name and                                    | d Address of C   | Current Registered Agent:              | Name and A                                  | Address of New Registered Agent:  |    |  |
| 323 LINDE<br>ELLENTO<br>The above           | N, FL 34222  | US<br>submits this statement for the p | ourpose of changing its                     | registered office or registered agent, or bot   | h, |  |
| SIGNATU                                     |  |  |   |   |    |  |
| SIGNATO                                     |  | nic Signature of Registered Age        | ent   | Date  | _  |  |
| Election Ca                                 | mpaign Financin  | g Trust Fund Contribution ( ).         |   |   |    |  |
| OFFICERS AND DIRECTORS:                     |  |  | ADDITIONS                                   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  |    |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | PD ( )<br>GRAY, CAREY<br>323 LINDEN DI<br>ELLENTON, FL | RIVE                                   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition   |    |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | ( )  | Delete                                 | Name:<br>Address:                           | TRES ( ) Change (X) Addition<br>GRAY, VALERIE<br>323 LINDEN DRIVE<br>ELLENTON, FL 34222 |    |  |

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: VALERIE GRAY **TRES** 01/09/2008