2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05602

FILED Jan 08, 2007 Secretary of State

Entity Name: NORTH AMERICAN CONSUMER ALLIANCE COMPANY

Current Principal Place of Business:		New Principal Place of Business:
	LLAS PARKWAY	
#750 DALLAS, 1	TX 75248 US	
Current N	lailing Address:	New Mailing Address:
	LLAS PARKWAY	
#750 DALLAS, 1	TX 75248 US	
FEI Number	: 75-1844580 FEI Number Applied	For () FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of Current Registered	Agent: Name and Address of New Registered Agent:
11380 PR PALM BE	ATE CREATIONS NETWORK INC OSPERITY FARMS ROAD, #221E ACH GARDENS, FL 33410 US anamed entity submits this stateme	ent for the purpose of changing its registered office or registered agent, or both,
	e of Florida.	
in the Stat		
in the Stat		stered Agent Date
in the Stat SIGNATU	RE:	stered Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
in the Stat SIGNATU	RE:Electronic Signature of Reg	•
in the Stat SIGNATU OFFICER Title: Name: Address:	RE: Electronic Signature of Reg S AND DIRECTORS: PD () Delete REDMOND, JAMES 15135 DUTCHMANS DR.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address:
in the Stat SIGNATU OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	RE: Electronic Signature of Reg S AND DIRECTORS: PD () Delete REDMOND, JAMES 15135 DUTCHMANS DR. ROGERS, AR 72756 US ASVP () Delete NJUS, SANDRA S 15770 DALLAS PARKWAY, STE 750	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA NJUS ASVP 01/08/2007