

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90078 020 ***158.75

0608066 - AT

DOCUMENT # P08783

1. Entity Name
NATURAL ENERGY UNLIMITED, INC.

Principal Place of Business 108 ROYAL STREET NEW ORLEANS LA 70130	Mailing Address 3 WESTBROOK CORPORATE CENTER SUITE 500 WESTCHESTER IL 60154
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 72-0902131	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**ORTIZ, MARIA
 C/O THE GROVE 9320 AIRPORT BLVD #8
 ORLANDO INTERNATIONAL AIRPORT
 ORLANDO FL 32827**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		
TITLE	P/D	<input type="checkbox"/> Delete
NAME	MENUTIS, RUTH ANN	
STREET ADDRESS	108 ROYAL STREET	
CITY-ST-ZIP	NEW ORLEANS LA	
TITLE	V/D	<input checked="" type="checkbox"/> Delete
NAME	VALTEAU, PAUL	
STREET ADDRESS	108 ROYAL ST	
CITY-ST-ZIP	NEW ORLEANS LA 70130	
TITLE	CD	<input type="checkbox"/> Delete
NAME	DUKLER, MARTIN	
STREET ADDRESS	3 WESTBROOK CORPORATE CENTER, STE 500	
CITY-ST-ZIP	WESTCHESTER IL 60154	
TITLE	VST	<input type="checkbox"/> Delete
NAME	IRELAND, ROBERT	
STREET ADDRESS	3 WESTBROOK CORPORATE CENTER, STE 500	
CITY-ST-ZIP	WESTCHESTER IL 60154	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Menutis, Ruth Ann	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Valteau, Paul	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	C/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dukler, Martin	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VISIT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ireland, Robert	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PAUL LOUPAKOS	
STREET ADDRESS	108 ROYAL STREET	
CITY-ST-ZIP	NEW ORLEANS LA 70130	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **REQUIRED** **2/8/02** **708-534-6948x3210**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)