2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29518

Entity Name: THE NIELSEN-WURSTER GROUP, INC.

FILED Jul 12, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
345 WALL STREET PRINCETON, NJ 08540				1060 STATE ROAD 2ND FLOOR PRINCETON, NJ 08540		
Current Mailing Address:				New Mailing Address:		
345 WALL STREET PRINCETON, NJ 08540				1060 STATE ROAD 2ND FLOOR PRINCETON, NJ 08540		
FEI Number:	: 13-2874087	FEI Number Applied For()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Desired ()
Name and	Address of (Current Registered Agent:		Name and	Address of N	lew Registered Agent:
1601 WES	N, ROBERT F ST MARION AV ORDA, FL 339	/E.,STE.203H				
The above in the State	named entity e of Florida.	submits this statement for the pu	irpose o	f changing it	s registered c	office or registered agent, or both,
SIGNATUR	RE:					
	Electro	nic Signature of Registered Ager	nt			Date
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:		ADDITION	S/CHANGES	TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	CD (NIELSEN, KRIS 719-2ND AVE., SEATTLE, WA	STE.700		Title: Name: Address: City-St-Zip:) Change ()Addition
Title: Name: Address: City-St-Zip:	DVT (GALLOWAY, F 719-2ND AVE., SEATTLE, WA	STE. 700		Title: Name: Address: City-St-Zip:	()) Change ()Addition
Title: Name: Address: City-St-Zip:	PD (NIKAIN, REGA 345 WALL STF PRINCETON, N	REET		Title: Name: Address: City-St-Zip:	NIKAIN, REZA) Change ()Addition OAD 2ND FLOOR IJ 08540
Title: Name: Address: City-St-Zip:	VSD (PAUL, MARY A 345 WALL STF PRINCETON, N	REET		Title: Name: Address: City-St-Zip:	PAUL, MARY A	OAD 2ND FLOOR
Title: Name: Address: City-St-Zip:	VD (KERWAN, WIL PO BOX 3467 FARFAX, VA 2			Title: Name: Address: City-St-Zip:	VD (X KERIVAN, WILL PO BOX 3467 FARFAX, VA 2	
Title: Name: Address: City-St-Zip:	V (DIGRHAM, JAC 3251 EMELICH CLE ELUM, W.	(ROAD		Title: Name: Address: City-St-Zin:	V (X DIGNUM, JACK 3251 EMERICK CLE FLUM, WA	(ROAD

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY A. PAUL VSD 07/12/2006