

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40763

FILED  
Apr 13, 2007  
Secretary of State

Entity Name: NATIONAL CORPORATE RESEARCH, LTD., INC.

**Current Principal Place of Business:**

515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301

**New Mailing Address:**

FEI Number: 13-3246732      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPDIRECT AGENTS, INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: WAGNER, HOWARD  
Address: 225 W. 34TH STREET, STE. 910  
City-St-Zip: NEW YORK, NY 10122

Title: DVPS ( ) Delete  
Name: WAGNER, JOAN  
Address: 225 W. 34TH STREET, STE. 910  
City-St-Zip: NEW YORK, NY 10122

Title: DVP ( ) Delete  
Name: JACOBI, BRUCE  
Address: 225 W. 34TH STREET, STE. 910  
City-St-Zip: NEW YORK, NY 10122

Title: VP ( ) Delete  
Name: MORRISSEY, JOHN  
Address: 225 WEST 34TH STREET, SUITE 910  
City-St-Zip: NEW YORK, NY 10122

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOHN MORRISSEY

VP

04/13/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date