2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000060736

1. Entity Name
NELNET MARKETING SOLUTIONS, INC.

Principal Place of Business	Mailing Address
121 S 13TH ST LINCOLN, NE 68508	121 S 13TH STREET STE 201 LINCOLN, NE 68508

DO NOT WRITE IN THIS SPACE

02102006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3210387
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	TD
NAME	HEIMES, TERRY
STREET ADDRESS	121 SOUTH 13TH STREET, STE 201
CITY-ST-ZIP	LINCOLN, NE 68508
TITLE	PD
NAME	DUNLAP, MICHAEL
STREET ADDRESS	121 SOUTH 13TH STREET, STE 201
CITY-ST-ZIP	LINCOLN, NE 68508
TITLE	S
NAME	MARTINEZ, EDWARD
STREET ADDRESS	3015 S PARKER RD, #400
CITY-ST-ZIP	AURORA, CO 80014
TITLE	D
NAME	BUTTERFIELD, STEPHEN
STREET ADDRESS	6991 E CAMELBACK RD STE B290
CITY-ST-ZIP	SCOTTSDALE, AZ 85251
TITLE	V
NAME	KRUGER, JAMES
STREET ADDRESS	121 S 13TH ST STE 201
CITY-ST-ZIP	LINCOLN, NE 68508
TITLE	S
NAME	MUNN, WILLIAM
STREET ADDRESS	3015 S PARKER RD STE 400
CITY-ST-ZIP	AURORA, CO 80014

U00000454567
03/15/06-80020-021 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 2-15-2006 (402) 458-2303
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #