

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000077307

Entity Name: NEI, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

611 SOUTH FORT HARRISON
STE 275
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

PO BOX 1408
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 59-3477943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORTON, TERESA Y
PO BOX 1408
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

NORTON, TERESA Y
611 SOUTH FORT HARRISON
SUITE 275
CLEARWATER, FL 33756 US

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

04/28/2008

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NORTON, TERESA Y
Address: PO BOX 1408
City-St-Zip: OLDSMAR, FL 34677

Title: VP () Delete
Name: NORTON, CHRISTOPHER K
Address: PO BOX 1408
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: TERESA NORTON

Electronic Signature of Signing Officer or Director

MS

04/28/2008

Date