

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000005281

Entity Name: NSG, INC.

FILED
Mar 30, 2007
Secretary of State

Current Principal Place of Business:

PO BOX 83
LEHIGH ACRES, FL 339700083

New Principal Place of Business:

2367 SUNRISE BLVD
FT. MYERS, FL 33907

Current Mailing Address:

P.O. BOX 83
LEHIGH ACRES, FL 339700083

New Mailing Address:

5241 WHISPERING PINES RD
BLAIRSVILLE, GA 30512

FEI Number: 65-1025750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILHELM, MICHEL C
1461 SCENIC ST
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

WILHELM, JAMES A
2367 SUNRISE BLVD.
FT. MYERS, FL 33907 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: JAMES A. WILHELM

03/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: WILHELM, MICHEL C
Address: 1461 SCENIC ST
City-St-Zip: LEHIGH ACRES, FL 33936

Title: DVP () Delete
Name: WILHELM, RICHARD L
Address: P.O. BOX 83
City-St-Zip: LEHIGH ACRES, FL 33970

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: WILHELM, MICHEL C
Address: 5241 WHISPERING PINES RD.
City-St-Zip: BLAIRSVILLE, GA 30512 US

Title: DVP (X) Change () Addition
Name: WILHELM, RICHARD L
Address: 5241 WHISPERING PINES RD.
City-St-Zip: BLAIRSVILLE, GA 30512 US

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: MICHEL C. WILHELM

PRES

03/30/2007

Electronic Signature of Signing Officer or Director

Date