2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jul 17, 2006 08:00 AM DOCUMENT # P99000064585 Secretary of State NATIONAL STRATEGIES, INC. Principal Place of Business Mailing Address 625C PONTE VEDRA BLVD 65 TECHNOLOGY PARKWAY N.W. ROME, GA 30165 US PONTE VEDRA BEACH, FL 32082 07052006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 58-2485241 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOUSTON, CLARENCE H JR. DO NOT WRITE TAYLOR, STEWART, HOUSTON & DUSS, P.A. 1050 RIVERSIDE AVE. IN THIS SPACE JACKSONVILLE, FL 32204 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 Signature, typed or printed name of registered agent and title if applicable. , (NOTE: Registered Agent signature required when reinstating) DATE 11100110570578 07/17/06-80007-009 550.00 FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 6, 2006 10. OFFICERS AND DIRECTORS TITLE YANCEY, DELOS H JR NAME STREET ADDRESS P.O. BOX 1907 PONTE VEDRA BEACH, FL 32082 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP MLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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:

NAME STREET ADDRESS CITY-ST-ZIP

HUSS HYANCY DE OS H. MARGEY, JF.

7-10-06

706-235-8154

FILED