

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000626

FILED
Jan 04, 2007
Secretary of State

Entity Name: NORTH-AMERICAN ASSOCIATION OF TELECOMMUNICATIONS DEALERS, INC.

Current Principal Place of Business:

131 N.W. 1ST AVE
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

131 N.W. 1ST AVE
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 36-3479965 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARION, JOSEPH
131 N.W. 1ST AVE
DELRAY BEACH, FL 33444 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

OFFICERS AND DIRECTORS:

Title: MR. () Delete
Name: BONDE, CHRIS
Address: 1450 HIGHWOOD EAST BLVD
City-St-Zip: PONTIAC, MI 48340 US

Title: MR. () Delete
Name: PERLMUTTER, GREG
Address: 34 WHITE LAKE ROAD
City-St-Zip: SPARTA, NJ 07871 US

Title: MR. () Delete
Name: GOEBEL, JAMES
Address: 19 WORTHINGTON ACCESS DRIVE
City-St-Zip: MARYLAND HEIGHTS, MO 63043 US

Title: MR. () Delete
Name: NEGRI, JOHN
Address: 15 GARDNER ROAD
City-St-Zip: FAIRFIELD, NJ 07004 US

Title: MR. () Delete
Name: MARION, JOSEPH
Address: 131 NW FIRST AVENUE
City-St-Zip: DELRAY BEACH, FL 33444 US

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH MARION

DIR

01/04/2007

Electronic Signature of Signing Officer or Director

_____ Date