

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008360

FILED
Apr 22, 2012
Secretary of State

Entity Name: NATIONAL TUTORING ASSOCIATION, INC.

Current Principal Place of Business:

2520 PARKLAND DR.
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

PO BOX 6840
LAKELAND, FL 33807

New Mailing Address:

FEI Number: 35-2196495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AYAZ, SANDI DR.
2520 PARKLAND DR.
LAKELAND, FL 33811 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: D
Name: GIESE, LYNN
Address: 3199 ANGELA DR
City-St-Zip: GROVE CITY, OH 43123

Title: D
Name: AYAZ, SANDI DR.
Address: 2520 PARKLAND DR.
City-St-Zip: LAKELAND, FL 33811

Title: D
Name: KASSAM, KABIR
Address: 5940 W TOUHY
City-St-Zip: NILES, IL 60714

Title: D
Name: BANDYOPADHYAY, PAMELA DR.
Address: 25 JOURNAL SQUARE
City-St-Zip: JERSEY CITY, NJ 07306

Title: D
Name: WEINSTEIN, DANIEL MR
Address: 5214 VININGS BLVD
City-St-Zip: DUBLIN, OH 43016

Title: D
Name: RPYSTER-JAMES, KAREN D MS.
Address: 623 S WABASH AVE
City-St-Zip: CHICAGO, IL 60605

I hereby 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 all other like empowered.

SIGNATURE: DR. SANDI AYAZ

D

04/22/2012

Electronic Signature of Signing Officer or Director

Date