2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#810108

FILED Feb 15, 2011 Secretary of State

Entity Name: NATIONAL MULTIPLE SCLEROSIS SOCIETY

Current Principal Place of Business: New Principal Place of Business:

733 THIRD AVENUE C/O SHIRLEY RIVERA NEW YORK, NY 100173288 US

Current Mailing Address: New Mailing Address:

733 THIRD AVENUE C/O SHIRLEY RIVERA NEW YORK, NY 100173288 US

FEI Number: 13-5661935 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC. 515 E. PARK AVENUE

TALLAHASSEE, FL 32301 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 Date

OFFICERS AND DIRECTORS:

Γitle: C

Name: KUHN, THOMAS R

Address: 701 PENNSYLVANIA AVENUE, N.W.

City-St-Zip: WASHINGTON, DC 20004

Title: S

Name: MCALEER, LINDA J

Address: 20002 LUDLOW STREET - FIRST FLOOR

City-St-Zip: PHILADELPHIA, PA 19103

Title: T

Name: HOUGHTBY, CAROL M Address: 2395 ARIEL ST. N. SUITE B City-St-Zip: MAPLEWOOD, MN 55109

Title: PCEO

 Name:
 NELSON, JOYCE

 Address:
 733 THIRD AVE

 City-St-Zip:
 NEW YORK, NY 10017

Title:

 Name:
 BERNBAUM, BARBARA

 Address:
 1301 SPRING ST., NO. 23J

 City-St-Zip:
 SEATTLE, WA 981041353

Title: [

Name: BOGDONOFF, MICHAEL A
Address: 4000 BELL ATLANTIC TOWER
City-St-Zip: PHILADELPHIA, PA 19103

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: JOYCE NELSON CEO 02/15/2011