

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702236

FILED
Apr 30, 2018
Secretary of State
CC4968415766

Entity Name: NATIONAL ASSOCIATION OF LETTER CARRIERS,
RETIREMENT, EDUCATIONAL, SECURITY, TRAINING FOUNDATION, INC.

Current Principal Place of Business:

67101 NALCREST ROAD
NALCREST COMMUNITY APARTMENTS
NALCREST, FL 33856

Current Mailing Address:

P. O. BOX 6359
NALCREST COMMUNITY APARTMENTS
NALCREST, FL 33856

FEI Number: 59-1004167

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALKER, AMBER OFF MGR
67101 NALCREST ROAD
NALCREST, FL 33856 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: AMBER WALKER

04/30/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name ROSE, MATTHEW
Address 100 INDIANA AVE
City-State-Zip: WASHINGTON DC 20001

Title VP
Name ROLANDO, FREDERIC
Address 100 INDIANA AVE.
City-State-Zip: WASHINGTON DC 20001

Title TRUSTEE
Name YOUNG, TOM
Address 100 INDIANA AVE NW
City-State-Zip: WASHINGTON DC 20001

Title ST
Name RHINE, NICOLE
Address 100 INDIANA AVE NW
City-State-Zip: WASHINGTON DC 20001

Title TRUSTEE
Name SOUTHERN, DONALD
Address 100 INDIANA AVE
City-State-Zip: WASHINGTON DC 20001

Title TRUSTEE
Name GILL, MIKE
Address 100 INDIANA AVE
City-State-Zip: WASHINGTON DC 20001

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: MATTHEW ROSE

OFFICE MANANGER

04/30/2018

Electronic Signature of Signing Officer/Director Detail

Date