

**2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 727253

**Entity Name:** NATIONAL ASSOCIATION OF MORTGAGE BROKERS, INC.

**Current Principal Place of Business:**

601 PENNSYLVANIA AVE. NW  
SOUTH BUILDING SUITE 900  
WASHINGTON, DC 20004

**Current Mailing Address:**

601 PENNSYLVANIA AVE. NW  
SOUTH BUILDING SUITE 900  
WASHINGTON, DC 20004 US

**FEI Number:** 59-1673989

**Certificate of Status Desired:** No

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

SAUNDERS, VALERIE  
4651 SALISBURY ROAD  
SUITE 400  
JACKSONVILLE, FL 32256 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:** VALERIE SAUNDERS

**10/16/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT-ELECT  
Name            ANDREWS, ROCKE  
Address        3531 N. PANTANO RD.  
City-State-Zip: TUCSON AZ 85750

Title            IMMEDIATE PAST PRESIDENT  
Name            STEVENS, JOHN G.  
Address        6045 W 10050 N  
City-State-Zip: HIGHLAND UT 84003

Title            VP  
Name            VELEZ, MICHELLE  
Address        1300 S EL CAMINO REAL  
                 SUITE 505  
City-State-Zip: SAN MATEO CA 94402

Title            PRESIDENT  
Name            BETTENCOURT, JR., RICHARD M.  
Address        52 MAPLE STREET  
City-State-Zip: DANVERS MA 01923

Title            TREASURER  
Name            BURKLEY, III, GEORGE W.  
Address        216 N. MAIN STREET  
City-State-Zip: GOSHEN IN 46526

Title            SECRETARY  
Name            BETTIS, CHRISTOPHER J.  
Address        474 WILLAMETTE ST.  
                 SUITE 306  
City-State-Zip: EUGENE OR 97401

*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:** RICHARD M. BETTENCOURT, JR.

**PRESIDENT**

**10/16/2018**

Electronic Signature of Signing Officer/Director Detail

Date