Entity Name: NATIONAL NON-PROFIT FOR AMERICANS WITH DISABILITIES, INC.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

901 CHESTNUT STREET SUITE C CLEARWATER, FL 33756

Current Mailing Address:

901 CHESTNUT STREET SUITE C CLEARWATER, FL 33756 US

DOCUMENT# N0200002128

FEI Number: 04-3625771

Name and Address of Current Registered Agent:

Certificate of Status Desired: No

MICHAEL J FAEHNER ESQ 600 BYPASS DRIVE STE 100 CLEARWATER, FL 33764 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

Officer/Director Detail :

	Title	DP	Title	DV
	Name	FINCHUM, TRAVIS D.	Name	LONG, KOLE J
	Address	901 CHESTNUT STREET SUITE C	Address	901 CHESTNUT STREET SUITE C
	City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756
	Title	DTS	Title	D
	Name	JIZ, JENNIFER		-
	Address		Name	GONNELLI, ASHLEY
	SUITE C	901 CHESTNUT STREET SUITE C	Address	901 CHESTNUT STREET SUITE C
	City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756

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: TRAVIS D FINCHUM

PRESIDENT

Date

Electronic Signature of Signing Officer/Director Detail

FILED Mar 09, 2017 Secretary of State CC7012551144