

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 738958

1. Entity Name

NATIONAL ORGANIZATION FOR VICTIM ASSISTANCE, INC

Principal Place of Business

1757 PARK RD. NW
WASHINGTON. D C 20010

Mailing Address

1757 PARK RD. NW
WASHINGTON. D C 20010-2101

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LYNCH, CATHERINE G.
1515 B.W, 7TH STREET, SUITE 112
MIAMI FL 33125

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME YOUNG, MARLENE A.
STREET ADDRESS 1757 PARK RD NW
CITY-ST-ZIP WASHINGTON DC

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☒ Delete
NAME NEKEL, E
STREET ADDRESS 593 CRAIG AVE
CITY-ST-ZIP PARANUS NJ 07652

TITLE ☐ Change ☒ Addition
NAME PRESIDENT
STREET ADDRESS NORMAN S. EARLY
CITY-ST-ZIP 3598 S. Hillcrest Drive
DENVER, CO 80237

TITLE S ☐ Delete
NAME ADKINS, J
STREET ADDRESS 61 GREENE ST
CITY-ST-ZIP XENIA OH 45385

TITLE ☒ Change ☐ Addition
NAME VICE PRESIDENT
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME STEIN, JOHN H.
STREET ADDRESS 1757 PARK RD NW
CITY-ST-ZIP WASHINGTON D.C.

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☒ Delete
NAME SHARP, V
STREET ADDRESS 32 N STONE, STE 800
CITY-ST-ZIP TUCSON AZ 85701

TITLE ☐ Change ☒ Addition
NAME SECRETARY
STREET ADDRESS SANDRA MCGOWAN
CITY-ST-ZIP PO Box 900 COURT ST.
MORRISTOWN NJ 07960

TITLE T ☒ Delete
NAME DELANGRO, ANN
STREET ADDRESS 1500 E NEWPORT PIKE SUITE 10
CITY-ST-ZIP WILMINGTON DE 19804

TITLE ☐ Change ☒ Addition
NAME TREASURER
STREET ADDRESS Kenneth Coleman
CITY-ST-ZIP Rm Box 232
WAVELAND, IN 47489

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1669254 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

CR2E037 19/99