2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738958

FILED Mar 31, 2004 Secretary of State

Entity Name: NATIONAL ORGANIZATION FOR VICTIM ASSISTANCE, INC.

Current Principal Place of Business:				New Principal Place of Business:		
1730 PARK WASHING	RD NW TON,, DC 20	010				
Current Mailing Address:				New Mailing Address:		
1730 PARK WASHING	RD NW TON,, DC 20	010				
FEI Number: 59-1669254 FEI Number Applied For() FEI N			FEI Nui	umber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
	ATHERINE G. 7TH STREET 33125 US	, SUITE 112				
The above in the State		submits this statement for the	purpose o	of changing i	ts registere	d office or registered agent, or both,
SIGNATUR	E:					
Electronic Signature of Registered Agent				Date		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	YOUNG, MARL	PARROTT MTN RD		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	ROSSMAN, EL	RAN JAMISON WAY		Title: Name: Address: City-St-Zip:	,	(X) Change () Addition ELIZABETH EE FRAN JAMISON WAY 32940
Title: Name: Address: City-St-Zip:	BOSSOVICH, F	E DRIVE STE 802		Title: Name: Address: City-St-Zip:	S RHONDA, E 41 N. PERF DAYTON, C	RY STREET, SUITE 212
Title: Name: Address: City-St-Zip:	STEIN, JOHN H	PARROT MTN ROAD		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	ADKINS, JEAN	Γ., LOWER LEVEL		Title: Name: Address: City-St-Zip:	VP MICHAEL, I 4400 UNIVE FAIRFAX, V	ERSITY DRIVE
Title: Name: Address: City-St-Zip:	LAVORY, CAR	RONT STREET		Title: Name: Address: City-St-Zip:	T KENNETH, 217 E. OHIO ROCKVILLE	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MARLENE A. YOUNG D 03/31/2004