

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2007 8:00 am
Secretary of State

02-27-2007 90003 047 ****70.00

DOCUMENT # 743440 1. Entity Name NATIONAL HIGH SCHOOL ATHLETIC COACHES ASSOCIATION, INC.					
Principal Place of Business 3457 26TH AVE SW FARGO, ND 58103 US			Mailing Address PO BOX 10065 FARGO, ND 58106 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
4. FEI Number 59-1834256				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PROKES, DONALD 507 ISLAND WAY CLEARWATER, FL 33767-1902			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	1V BROWNFIELD, JIM 410 RAYMONDALE #15 SOUTH PASADENA, CA 91030 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P TOMPKINS, RICHARD 9 SOUTH LIGHTHOUSE DR. MEARS, MI 49436 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	2V SHEPHERD, HAROLD 414 W 6TH STREET VINTON, IA 52349 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ESRD ORVIK, GELAINE PO BOX 10065 FARGO, ND 58106 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	ESRD HAWK, MAX 2200 VALLEY ROAD YANKTON, SD 57078 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ED ORVIK, GELAINE T PO BOX 10065 FARGO, ND 58106 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	ORVIK GELAINE L. PO Box 10065 FARGO ND 58106 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	1P OMAN, DAVE 4105 HARTFORD GRAND ISLAND, NE 68803 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Gelaine Orvik</u> <u>01/29/07</u> <u>761-367-8282</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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