2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#767263

FILED Jan 13, 2009 Secretary of State

Entity Name: NATIONAL DISABILITY RIGHTS NETWORK, INC.

Current Principal Place of Business: New Principal Place of Business: 900 SECOND ST NE STE 211 WASHINGTON, DC 20002 **Current Mailing Address: New Mailing Address:** 900 SECOND ST NE STE 211 WASHINGTON, DC 20002 FEI Number: 59-2333653 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WESTON, GARY ADVOCACY CENTER FOR PWD C/O ACPWD, INC 2728 CENTERVIEW DRIVE 2671 EXEC. CTR. CIRCLE W., STE 100 SUITE 101 TALLAHASSEE, FL 32301 UŚ TALLAHASSEE, FL 32301 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: ROBERT E. WHITNEY 01/13/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BAILEY, MICHAEL Name: Name: 4265 NE HALSEY #817 Address: Address: City-St-Zip: PORTLAND, OR 97213 City-St-Zip: Title: PD () Delete Title: () Change () Addition JOHNSON, MARGARET J Name: Name: Address: 1029 J ST #150 Address: City-St-Zip: SACRAMENTO, CA 95814 City-St-Zip: Title: () Delete Title: (X) Change () Addition PREVOST, GLORIA Name: PREVOST, GLORIA Name: 220 I ST. NE, STE 130 3710 LANDMARK DRIVE, #208 Address: Address: City-St-Zip: WASHINGTON, DC 20002 City-St-Zip: COLUMBIA, SC 29204 Title: () Delete Title: () Change () Addition M DECKER, CURTIS L. Name: Name: 900 SECOND ST NE #211 Address: Address: City-St-Zip: WASHINGTON, DC City-St-Zip: Title: () Delete Title: TD (X) Change () Addition BREEDLOVE, LYNN Name: Name: SHEA, SHIRLEY 131 W. WILSON ST. #700 2416 21ST AVENUE SOUTH #100 Address: Address: City-St-Zip: MADISON, WI 53703 City-St-Zip: NASHVILLE, TN 37212 Title: () Delete Title: () Change (X) Addition MILLER, COLLEEN Name: Name: Address: Address: 1910 BYRD AVENUE, #5 RICHMOND, VA 23230 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MARGARET JOHNSON PRES 01/13/2009