2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#831137

Entity Name: NATIONAL MOTOR CLUB OF AMERCIA, INC.

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 130 E JOHN CARPENTER FREEWAY IRVING, TX 75062 **Current Mailing Address: New Mailing Address:** P O BX 809110 DALLAS, TX 753809110 US FEI Number: 75-0942817 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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 Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition KRZYSIAK, MATTHEW Name: Name: 130 E. JOHN CARPENTER FRWY. Address: Address: City-St-Zip: IRVING, TX 75062 City-St-Zip: Title: Title: () Delete () Change () Addition Name: JENSEN, JEFFREY J Name: 130 E. JOHN CARPENTER FRWY. Address: Address: IRVING, TX 75062 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition ANDERSON, PETER R Name: Name: 130 E. JOHN CARPENTER FRWY. Address: Address: City-St-Zip: IRVING, TX 75062 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition STROUP, HENRY P Name: Name: Address: 900 N. LAKE HAVASU AVE Address: City-St-Zip: LAKE HAVASU CITY, AZ 86403 City-St-Zip: Title: () Delete Title: () Change () Addition

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: PETER R. ANDERSON TD 04/17/2008

PAGEL, CINDY D

IRVING, TX 75062

130 E. JOHN CARPENTER FRWY.

Name:

Address: City-St-Zip: