

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005504

FILED
Jan 24, 2006
Secretary of State

Entity Name: SERVICE CORPS OF RETIRED EXECUTIVES ASSOCIATION INC.

Current Principal Place of Business:

409 3RD ST SW
WASHINGTON, DC 200243213

New Principal Place of Business:

Current Mailing Address:

409 3RD ST SW
WASHINGTON, DC 200243213

New Mailing Address:

FEI Number: 52-1067290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: YANCEY, JR, W KENNETH
Address: 21380 CLAPPERTOWN DR
City-St-Zip: ASHBURN, VA 20147

Title: V () Delete
Name: BRITT, SANDRA A
Address: 5409 LAKEFORD LANE
City-St-Zip: BOWIE, MD 20720

Title: V () Delete
Name: GOODNO, CHRISTINE
Address: 7724 HAVENSIDE TERRACE
City-St-Zip: ROCKVILLE, MD 20855

Title: D () Delete
Name: BAILEY, ROBERT
Address: 9628 SUMMERLAKES DR
City-St-Zip: CARMEL, IN 46032

Title: D () Delete
Name: BROWN, R DUNCAN
Address: 2047 SHAW WOODS DRIVE
City-St-Zip: ROCKFORD, IL 61107

Title: D () Delete
Name: CHRISTIANSEN, MARJORIE
Address: 2485 LONDIN LANE, APT 316
City-St-Zip: ST PAUL, MN 55119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: KINDRED, DOUG
Address: 144 OSPREY CIRCLE
City-St-Zip: HOPE, ID 83836

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SANDRA A. BRITT

VP

01/24/2006

Electronic Signature of Signing Officer or Director

Date