

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005504

FILED  
Feb 12, 2007  
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:**

1175 HERNDON PARKWAY  
HERNDON, VA 20170

**Current Mailing Address:**

409 3RD ST SW  
WASHINGTON, DC 200243213

**New Mailing Address:**

1175 HERNDON PARKWAY  
HERNDON, VA 20170

**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: KINDRED, DOUG  
Address: 144 OSPREY CIRCLE  
City-St-Zip: HOPE, ID 83836

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: V (X) Change ( ) Addition  
Name: MONTESA, NOEL  
Address: 1175 HERNDON PARKWAY #900  
City-St-Zip: HERNDON, VA 20170

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: ( ) 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: NOEL MONTESA

D

02/12/2007

Electronic Signature of Signing Officer or Director

Date