

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006211

FILED  
Jan 09, 2006  
Secretary of State

Entity Name: NATIONAL ASSOCIATION OF TRAIL LAWYER EXECUTIVES, INC.

**Current Principal Place of Business:**

3375-E CAPITAL CIRCLE NE  
SUITE 1  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

1400 VILLAGE SQUARE BLVD  
#3-138  
TALLAHASSEE, FL 32312

**New Mailing Address:**

FEI Number: 91-1248754      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILSON, KATHLEEN  
3375-E CAPITAL CIRCLE NE  
SUITE 1  
TALLAHASSEE, FL 32308 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: PD ( ) Delete  
Name: SHIELDS, KAY  
Address: P.O. BOX 1777  
City-St-Zip: BOISE, ID 83701

Title: PD ( ) Delete  
Name: TAYLOR, RICHARD M JR  
Address: P.O. BOX 10918  
City-St-Zip: RALEIGH, NC 276050918

Title: SD ( ) Delete  
Name: SHANOR, MARCIA  
Address: 2111 WARREN AVENUE  
City-St-Zip: CHEYENNE, WY 820013739

Title: TD ( ) Delete  
Name: CALLAWAY, TONY  
Address: 50 HURT PLAZA SE  
City-St-Zip: ATLANTA, GA 303032916

Title: VPD ( ) Delete  
Name: TERZARIOL, CARLA  
Address: 1370-1100 MELVILLE STREET  
City-St-Zip: VANCOUVER CANANDA, OC OC

Title: ED ( ) Delete  
Name: WILSON, KATHLEEN  
Address: 3375-E CAPITAL CIRCLE NE SUITE 1  
City-St-Zip: TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: TERZARIOL, CARLA  
Address: 1111 - 1100 MELVILLE STREET  
City-St-Zip: VANCOUVER, BC V6E 4A6 CA

Title: PD (X) Change ( ) Addition  
Name: SHANOR, MARCIA  
Address: 2111 WARREN AVENUE  
City-St-Zip: CHEYENNE, WY 82001

Title: V (X) Change ( ) Addition  
Name: WILSON, MICHEALLE B  
Address: 150 WEST MARKET STREET #210  
City-St-Zip: INDIANAPOLIS, IN 46204

Title: S (X) Change ( ) Addition  
Name: AVERY, GINGER  
Address: 770 WASHINGTON AVE. SUITE 170  
City-St-Zip: MONTGOMERY, AL 36104

Title: T (X) Change ( ) Addition  
Name: STRIULI, NANCY  
Address: 1 PARK ROW  
City-St-Zip: PROVIDENCE, RI 02903

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: KATHLEEN WILSON

ED

01/09/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date