

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006211

FILED
Feb 02, 2007
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:

7908 BRIARCREEK ROAD SOUTH
TALLAHASSEE, FL 32312

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:

WILSON, KATHLEEN
7908 BRIARCREEK ROAD SOUTH
TALLAHASSEE, FL 32312 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: KATHLEEN WILSON

02/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

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

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

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: SHANOR, MARCIA
Address: 2111 WARREN AVENUE
City-St-Zip: CHEYENNE, WY 82001-373 US

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

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

Title: S (X) Change () Addition
Name: STRIULI, NANCY
Address: 400 RESERVOIR AVENUE SUITE 3G
City-St-Zip: PROVIDENCE, RI 02907 US

Title: T (X) Change () Addition
Name: CARRUTHERS, SCOTT
Address: 210 S MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: ED (X) Change () Addition
Name: WILSON, KATHLEEN
Address: 1400 VILLAGE SQ BLVD SUITE 3-138
City-St-Zip: TALLAHASSEE, FL 32312

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

02/02/2007

Electronic Signature of Signing Officer or Director

Date