

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006211

FILED  
Feb 01, 2011  
Secretary of State

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

**Current Principal Place of Business:**

7908 BRIARCREEK RD SOUTH  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

**Current Mailing Address:**

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

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

WILSON, KATHLEEN  
7908 BRIARCREEK RD  
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:

02/01/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: STRIULI, NANCY  
Address: 400 RESERVOIR AVENUE SUITE 3B  
City-St-Zip: PROVIDENCE, RI 02907 US

Title: P  
Name: TOWNSEND, TOMMY  
Address: POST OFFICE BOX 788  
City-St-Zip: AUSTIN, TX 78767 US

Title: D  
Name: MARESA, FAWNS  
Address: 10602 TIMBERWOOD CIRCLE SUITE 8  
City-St-Zip: LOUISVILLE, KY 40223 US

Title: V  
Name: KEITH, SUZANNE  
Address: 1903 DIVISION STREET  
City-St-Zip: NASHVILLE, TN 37203 US

Title: D  
Name: DONOFRIO, CAROLYN  
Address: 913 MARKET STREET SUITE 315  
City-St-Zip: WILMINGTON, DE 19801 US

Title: ED  
Name: KATHLEEN, WILSON  
Address: 1400 VILLAGE SQ BLVD SUITE 3-138  
City-St-Zip: TALLAHASSEE, FL 32312 US

I hereby 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 all other like empowered.

SIGNATURE: KATHLEEN WILSON

ED

02/01/2011

Electronic Signature of Signing Officer or Director

Date