

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000710

FILED
Jan 08, 2009
Secretary of State

Entity Name: NATIONAL GAY & LESBIAN TASK FORCE FOUNDATION, INC.

Current Principal Place of Business:

1325 MASSACHUSETTS AVE. NW, SUITE 600
WASHINGTON, DC 20005

New Principal Place of Business:

Current Mailing Address:

1325 MASSACHUSETTS AVE. NW, SUITE 600
WASHINGTON, DC 20005

New Mailing Address:

FEI Number: 52-1624852 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: COCD () Delete
Name: ACOSTA, ALAN
Address: 38 PEARCE MITCHELL PLACE
City-St-Zip: STANFORD, CA 94805

Title: SD () Delete
Name: LAINE, JODY
Address: 152 NW 65TH ST.
City-St-Zip: SEATTLE, WA 98117

Title: COCD () Delete
Name: SEXTON, MARK
Address: 622 GREENWICH ST. #C
City-St-Zip: NEW YORK, NY 10014

Title: TD () Delete
Name: BURNLEY, MAUREEN
Address: 175 9TH AVENUE
City-St-Zip: NEW YORK, NY 10011

Title: VCD () Delete
Name: ZEMAN, PAULA REDD
Address: 125 TERESA LANE
City-St-Zip: MAMARONECK, NY 10543

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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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 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: BRIAN JOHNSON

CFO

01/08/2009

Electronic Signature of Signing Officer or Director

Date