2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006008

Entity Name: NATIONAL ARBITRATION FORUM, INC.

FILED Jul 25, 2007 Secretary of State

Current Principal Place of Business:			New Prin	New Principal Place of Business:	
	ZATA BLVD JIS PARK, MI	N 55426			
Current Mailing Address:			New Mai	New Mailing Address:	
	ZATA BLVD JIS PARK, MI	N 55426			
FEI Number: 41-1780680 FEI Number Applied F		FEI Number Applied For ()	() FEI Number Not Applicable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name an	nd Address of New Registered Agent:	
2284 TROO SANIBEL, I		US	purpose of changing	g its registered office or registered agent, or both	
SIGNATUR	RE:				
0.0.0.		nic Signature of Registered Ag	ent	Date	
Election Can		03(2)(b), F.S., the corporation did n g Trust Fund Contribution (). STORS:	-	ons/Changes to officers and directo	
Title: Name: Address: City-St-Zip:	CPT (ANDERSON, E 2284 TROON (SANIBEL, FL	COURT	Title: Name: Address: City-St-Zip:	DCF (X) Change () Addition ANDERSON, EDWARD C 2284 TROON COURT SANIBEL, FL 33957	
Title: Name: Address: City-St-Zip:	DVS (HAYDOCK, RC 134 SHERMAN DEADWOOD,	ISTREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ANDERSON, E	NNETT STREET	Title: Name: Address: City-St-Zip:	CEO (X) Change () Addition KELLY, MICHAEL F 6700 WEST SHORE DRIVE EDINA, MN 55435	
Title: Name: Address: City-St-Zip:	ANDERSON, S	H STREET STE 2603	Title: Name: Address: City-St-Zip:	D (X) Change () Addition KIM, KEITH 2622 ARGONAUTA STREET CARLSBAD, CA 92009	
Title: Name: Address: City-St-Zip:	D (FRANKE, C. W 484 HILLSCOU ROSEVILLE, M	JRT NORTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BOND, MARNI	OAKS ESTATE RD	Title: Name: Address: City-St-Zip:	D (X) Change () Addition SISAM, EDWIN S 167 ESTANCIA LANE b: BOERNE, TX 78006	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RYAN CHANDLEE, STAFF COUNSEL REP 07/25/2007