

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007931

FILED  
May 11, 2007  
Secretary of State

**Entity Name:** NATIONAL ASSOCIATION FOR INTERPRETATION, INC.

**Current Principal Place of Business:**

230 CHERRY ST  
FT COLLINS, CO 80521

**New Principal Place of Business:**

**Current Mailing Address:**

230 CHERRY ST  
FT COLLINS, CO 80521

**New Mailing Address:**

PO BOX 2246  
FT COLLINS, CO 80522

**FEI Number:** 84-1036938 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

C T 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: C ( ) Delete  
Name: MERRIMAN, TIM  
Address: 230 CHERRY ST  
City-St-Zip: FT COLLINS, CO 80521

Title: VC ( ) Delete  
Name: BROCHU, LISA  
Address: 230 CHERRY ST  
City-St-Zip: FT COLLINS, CO 80521

Title: P ( ) Delete  
Name: KIRKWOOD, EVIE  
Address: 50651 LAUREL RD  
City-St-Zip: S BEND, IN 46637

Title: V ( ) Delete  
Name: FISH, VERN  
Address: 657 RESERVE DR  
City-St-Zip: CEDAR FALLS, IA 50613

Title: S ( ) Delete  
Name: TOUNGBLOOD, LYNN  
Address: 3105 N TWYMAN RD  
City-St-Zip: INDEPENDENCE, MO 64058

Title: T ( ) Delete  
Name: BASMAN, VICKI  
Address: 2973 RAMBLE RD E  
City-St-Zip: BLOOMINGTON, IN 47408

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

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

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

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

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

Title: S (X) Change ( ) Addition  
Name: YOUNGBLOOD, LYNN  
Address: 3105 N TWYMAN RD  
City-St-Zip: INDEPENDENCE, MO 64058

Title: T (X) Change ( ) Addition  
Name: STEBBINS, BRUCE  
Address: 8477 E MUD LAKE RD  
City-St-Zip: BALDWINVILLE, NY 13027

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: TIM MERRIMAN

C

05/11/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date