

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2008 8:00 am
Secretary of State

07-28-2008 90029 047 ****61.25

DOCUMENT # F07000002328

1. Entity Name
NATIONAL PROFESSIONAL EXCHANGE, INC.



Principal Place of Business
25926 CHAFFEE CT.
MECHANICSVILLE, MD 20659

Mailing Address
25926 CHAFFEE CT.
MECHANICSVILLE, MD 20659

60043407



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07072008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
20-5206671

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME BELL, SHARON
STREET ADDRESS 25926 CHAFFEE CT.
CITY-ST-ZIP MECHANICSVILLE, MD 20659

TITLE managing Director ☒ Change ☐ Addition
NAME Bell, Sharon
STREET ADDRESS 25926 Chaffee CT
CITY-ST-ZIP mechanicsville, MD 20659

TITLE P ☒ Delete
NAME KEATHLEY, JOHN
STREET ADDRESS 3155 E PATRICK LANE STE 1
CITY-ST-ZIP LAS VEGAS, NV 891203481

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☒ Delete
NAME BELL, TIM
STREET ADDRESS 3155 E PATRICK LANE STE 1
CITY-ST-ZIP LAS VEGAS, NV 891203481

TITLE Secretary ☒ Change ☐ Addition
NAME Bell, Sharon
STREET ADDRESS 3155 E Patrick Lane STE 1
CITY-ST-ZIP Las Vegas, NV 891203481

TITLE T ☐ Delete
NAME FAIRCLOUGH, MARTIN
STREET ADDRESS 3155 E PATRICK LANE STE 1
CITY-ST-ZIP LAS VEGAS, NV 891203481

TITLE President ☒ Change ☐ Addition
NAME Fairclough, Martin
STREET ADDRESS 3155 E Patrick Lane STE 1
CITY-ST-ZIP Las Vegas, NV 891203481

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sharon Bell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sharon Bell

7/24/08

301-904-1229

Date

Florida Phone #