

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 22, 2012
Secretary of State

DOCUMENT# F11000004605

Entity Name: NATIONAL ALLIANCE FOR GRIEVING CHILDREN, INCORPORATED**Current Principal Place of Business:**1873 SE GASKINS CIRCLE
PORT ST. LUCIE, FL 34952**New Principal Place of Business:**961 NE TOWN TERRACE
JENSEN BEACH, FL 34957 US**Current Mailing Address:**P.O. BOX 2373
STUART, FL 34995**New Mailing Address:****FEI Number:** 20-2464043**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MCNIEL, ANDY
1873 SE GASKINS CIRCLE
PORT ST LUCIE, FL 34952 US**Name and Address of New Registered Agent:**MCNIEL, ANDY
961 NE TOWN TERRACE
JENSEN BEACH, FL 34957 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: ANDY MCNIEL

10/22/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD
Name: JAY, VICKI
Address: 900 W. WALL
City-St-Zip: MIDLAND, TX 79701

Title: VCD
Name: MANKIN, MARIAN
Address: 10050 BUFFALO SPEEDWAY
City-St-Zip: HOUSTON, TX 77054

Title: D
Name: PRIMO, JOSEPH
Address: 561 SPRINGFIELD AVENUE
City-St-Zip: SUMMIT, NJ 07901

Title: D
Name: JOSWICK, DAVE
Address: 900 NORTH MAITLAND AVENUE
City-St-Zip: MAITLAND, FL 32751

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: ANDY MCNIEL

ED

10/22/2012

Electronic Signature of Signing Officer or Director

Date