

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003854

FILED  
Apr 19, 2011  
Secretary of State

**Entity Name:** NATIONAL FFA FOUNDATION, INC.

**Current Principal Place of Business:**

6060 FFA DR  
INDIANAPOLIS, IN 462781370

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 68960  
INDIANAPOLIS, IN 462680960

**New Mailing Address:**

**FEI Number:** 54-6044662

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CHASEN, BELINDA  
325 WEST GAINES STREET  
TALLAHASSEE, FL 323990400 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: S  
Name: NASH, RAY  
Address: 208 HOLLIE HAVEN  
City-St-Zip: BOONEVILLE, MS 38829

Title: P  
Name: RAKESTRAW, JOHN  
Address: 2026 CREEKSIDE DRIVE  
City-St-Zip: LONGMONT, CO 80504

Title: T  
Name: FLETCHER, MARION D  
Address: #3 STATE CAPITAL MALL  
City-St-Zip: LITTLE ROCK, AR 722011063

Title: TR  
Name: ALFORD, MELODY  
Address: 200 POWELL PLACE  
City-St-Zip: BRENTWOOD, TN 37027

Title: TR  
Name: LUCAS, CURT  
Address: 500 MERO STREET, 21ST FLOOR  
City-St-Zip: FRANKFORT, KY 40601

Title: TR  
Name: ADENT, JOHN  
Address: 822 - 7TH STREET, SUITE 740  
City-St-Zip: GREELEY, CO 80631

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: MARION D. FLETCHER

T

04/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date