

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F98000000626

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** NORTH-AMERICAN ASSOCIATION OF TELECOMMUNICATIONS DEALERS, INC.

**Current Principal Place of Business:**

131 N.W. 1ST AVE  
DELRAY BEACH, FL 33444

**New Principal Place of Business:**

**Current Mailing Address:**

131 N.W. 1ST AVE  
DELRAY BEACH, FL 33444

**New Mailing Address:**

**FEI Number:** 36-3479965

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARION, JOSEPH  
131 N.W. 1ST AVE  
DELRAY BEACH, FL 33444 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:** MR.  
**Name:** BONDE, CHRIS  
**Address:** 1450 HIGHWOOD EAST BLVD  
**City-St-Zip:** PONTIAC, MI 48340 US

**Title:** MS.  
**Name:** MCKAY, MELODY  
**Address:** 14555 NORTH SCOTTSDALE ROAD  
**City-St-Zip:** SCOTTSDALE, AZ 85254 US

**Title:** MS.  
**Name:** PERRY, JULIE  
**Address:** 1300 E. 115TH  
**City-St-Zip:** BURNSVILLE, MN 55337 US

**Title:** MR.  
**Name:** PETE, AIELLO  
**Address:** 10449 ROSELLE ST. STE #2  
**City-St-Zip:** SAN DIEGO, CA 92121 US

**Title:** MR.  
**Name:** MARION, JOSEPH  
**Address:** 131 NW FIRST AVENUE  
**City-St-Zip:** DELRAY BEACH, FL 33444 US

**Title:** MR.  
**Name:** KIEP, BRIAN  
**Address:** 11203 GRANT ROAD  
**City-St-Zip:** CYPRESS, TX 77429 US

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:** JOSEPH MARION

MR.

01/04/2011

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

\_\_\_\_\_  
Date