2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 28, 2003 8:00 am
Secretary of State
07-28-2003 90153 040 ****61.25

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DOCUMENT # F99000000308

1. Entity Name
NATIONAL ADOPTION CENTER, INC.

Principal Place of Business	Mailing Address
1500 WALNUT ST., STE. 701 PHILADELPHIA PA 19102	423 W. 8TH ST #400 KANSAS CITY MO 64105

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-1966667 ☐ Applied For ☐ Not Applicable

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
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	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

FILE NOW: FEE IS $61.25
After September 10, 2003, min will be $236.25

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	2VP MULVEY, KERRY E 5001 WYNNEFIELD AVENUE PHILADELPHIA PA 19131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2VP Allan R. Frank 225 Washington Street Conshohocken, PA 19428	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ARMBRISTER, CLARENCE D 21ST ST., S. OF THE PARKWAY #203 PHILADELPHIA PA 19103-1099	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Clarence D. Armbrister 1801 N. Broad Street, Room 403 Philadelphia, PA 19122	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V DEVINE, JAY 200 S. BROAD ST. 10TH FL. PHILADELPHIA PA 19102	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Kathleen P. Gallagher 660 West Germantown Pike Plymouth Meeting, PA 19462	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MASON, THEODORE W ESQ 2700 TWO COMMERCE SQ-2001 MARKET ST PHILADELPHIA PA 19103	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1st VP Shirley M. Puccino 590 Naamans Road Claymont, DE 19703	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AST RICHARDSON, JOSEPH J 701 LEE ROAD WAYNE PA 19087	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Joseph J. Richardson 1200 Atwater Drive, Suite 200 Malvern, PA 19355	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MOSLEY, JOYCE 355 EAST SPRING AVE ARDMORE PA 19003	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AST Michael L. Rifkin 1205 Westlakes Drive, Suite 200 Berwyn, PA 19312	☐ Change ☒ Addition

CR2E037 (4/03)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: [signature] CHRISTINE REKUTER RESINGER 7/17/03 2158750325
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #