## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000004209

Entity Name: ING MEMBERS ASSOCIATION, INC.

Apr 29, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

556 TETON ST

LAKE MARY, FL 32746 US

**Current Mailing Address: New Mailing Address:** 

556 TETON ST

LAKE MARY, FL 32746 US

FEI Number: 31-1717531 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JAMISON, MICHAEL 556 TETON ST

LAKE MARY, FL 32746 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition JAMISON, MICHAEL JAMISON, MICHAEL Name: Name:

556 TETON ST Address: 556 TETON ST Address:

City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746 US

Title: EBMD () Delete Title: (X) Change ( ) Addition GRODY, MARK Name: GRODY, MARK Name:

Address: 90 PALOMINA CIRCLE Address: 90 PALOMINA CIRCLE City-St-Zip: PALM DESERT, CA 92211 City-St-Zip: PALM DESERT, CA 92211 US

Title: **EBMD** () Delete Title: **EBMD** (X) Change ( ) Addition GLOZEK, JOHN GLOZEK, JOHN Name: Name:

Address: 22 W NICHOLAI Address: 22 W NICHOLAI City-St-Zip: HICKSVILLE, NY 11801 City-St-Zip: HICKSVILLE, NY 11801 US

Title: PD ( ) Delete Title: PPD (X) Change ( ) Addition Name: O'CONNOR, TIM Name: O'CONNOR, TIM

Address: PO BOX 700 Address: PO BOX 700 ROCKWOOD, ONTARIO, NOB 2K0 ROCKWOOD, ON NOB 2K0 CA

City-St-Zip: City-St-Zip:

Title: VPD () Delete Title: (X) Change ( ) Addition NITKEWICZ, BOB HUBBARD, JAY Name: Name: 3980 SWENSON AVE. 21-00 ROUTE 208 Address: Address:

City-St-Zip: FAIR LAWN, NJ 07410 City-St-Zip: FAIR LAWN, NJ 07410 US

Title: () Delete Title: ( ) Change (X) Addition

CONVERSE, GEOFF Name: Name: Address: Address: 558 LUMBERT MILL RD CENTERVILLE, MA 02632 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MICHAEL JAMISON ED 04/29/2005