

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 27, 2009
Secretary of State**

DOCUMENT# N04000003698

Entity Name: NATIONAL ASSOCIATION OF SCREENING AGENCIES, INC.

Current Principal Place of Business:

337 DUKE ST
ALEXANDRIA, VA 22314

New Principal Place of Business:

Current Mailing Address:

337 DUKE ST
ALEXANDRIA, VA 22314

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALASCHAK, JAMES
7800 LAKE DOWN DR
WINTER PARK, FL 32792 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: P () Delete
Name: RHINESMITH, FRITZ
Address: PO BOX 1145
City-St-Zip: LAFAYETTE, CA 94549

Title: VP () Delete
Name: MIKKELSON, PAUL
Address: 7525 MITCHELL RD # 301
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: S () Delete
Name: TUCCI, BARBARA
Address: PO BOX 111088
City-St-Zip: TACOMA, WA 98411

Title: T () Delete
Name: DE WEBER, BILL
Address: 1630 W 1ST
City-St-Zip: SPOKANE, WA 99201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BILL DEWEBER

T

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date