2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N04000004888

FILED Jan 28, 2008 8:00 am Secretary of State 01-28-2008 90051 017 ****61.25

1. Entity Name NATIONAL WORKERS' COMPENSATION DEFENSE NETWORK, INC.									
315 PLANT AVE 315 P			g Address PLANT AVE PA, FL 33606			40011710			
2. Principal Place of Business - No P.O. Box # 3. Mailing			ng Address						
Suite, Apt. #, etc. Su		Suite, Apt	ite, Apt. #, etc.			01142008 CI	ng-NP	CR2E037 (12/0)6)
City & State Ci		City & Sta	y & State			4. FEI Number 33-109213			Applied For Not Applicable
Zip ,	Country Zip		Country			5. Certificate of St	atus Desired	□ \$8.75 Fee Red	Additional
	6. Name and Address of Current	Registered Ager	ot			7. Name and Add	ress of New R	egistered Agent	
00405.0		Name							
GRACE, ROBERT J 315 PLANT AVE TAMPA, FL 33606				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 lamiliar with, and accept the obligations of registered agent.									
SIGNATURE Signature, typed or printed harrie of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE									
							r		
Filing Fee is \$61.25 9. Election Cam Due by May 1, 2008 Trust Fund Ca						\$5.00 May Be Added to Fees		ake check payat ida Department d	
10.	OFFICERS AND DII	RECTORS		11.	Δ	ADDITIONS/CHANG	ES TO OFFICE	RS AND DIRECTOR	IS IN 10
TITLE	PD		Delete	TIFLE				☐ Cha	nge 🗌 Addition
NAME	STILES, MARYANN			NAME					Į.
STREET ADDRESS CIFY-ST-ZIP	315 PLANT AVE. TAMPA, FL 33606			STREET ADDRESS City-St-Zip					
TITLE	VD		Delete	TITLE				□ Cha	
NAME STREET ADDRESS CITY-SI-ZIP	ROSS, WILLIMA S 315 PLANT AVE. TAMPA, FL 33606			NAME STREET ADDRESS CITY-ST-ZIP	POS. POS. P. P.	S. WILLIAM McDONALDIK ELAWD, OH	M S IVESTMENT 1 44114	CTE, 8 00 SUP	EPIOR AVE.
TITLE	TD		Delete	TITLE			<u> </u>	☐ Cha	
NAME	TAYLOR, RAYFORD H			NAME					
STREET ADDRESS	2837 COUNTRY HOUSE LN.			STREET ADDRESS					{
CITY-ST-ZIP	BUFORD, GA 30519			CITY-ST-ZIP					
TITLE	SD		Delete	TITLE				☐ Cha	nge 🗌 Addition
NAME	WANN, DIANA			NAME					ĺ
STREET ADORESS	127 W. MAIN ST. STE 314		1	STREET ADDRESS CITY-ST-ZIP	l				}
CITY-ST-ZIP	LEBANON, IN 46051								ana [] Addition
HILE	II DOLELAS JONES	_		TITLE NAME	[☐ Cha	nge 🗌 Addition
SHEET ADDRESS SI CAVALLER BOULEVARD, SUITE 260			F 260	STREET ADDRESS	1				
CITY-ST-ZIP	FLORENCE, KY 4102	2	Ī	CITY-ST-ZIP					
TITLE	D		Delete	THLE				☐ Cha	nge Addition
NAME	FRED RITSEMA]	NAME]
STREET ADDRESS	1999 18th STREET	~ ^		STREET ADDRESS					Į.
CITY-ST-ZIP	DENUER, CO 200	<u> </u>		CITY-ST-ZIP	<u></u>	in Charles 410 ff	ide Control	lughor positivation	bo information
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of applemental 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 deliver 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 all schmidht with an address, with all other like empowered.									
(and 1									390
SIGNAT	URE: SIGNATURE AND TYPED OR	PRINTED NAME OF SKO	NING OFFICER OR DI	RECTOR	t		pate .	Daytme Pho	ne •

SEE ATTACHED -

ATTACHMENT

Continued # 10.

Directors (to add)

Title D

Name Albert Randall

Street Address The B & O Building, Two N.Charles St., Ste. 600

City-ST-Zip Baltimore, Maryland 21201

Title D

Name James Reiter

Street Address 30500 Northwestern Hwy. Suite 200

City-ST-Zip Farmington Hills, Michigan 48334

Title D

Name Bennett Pugh

Street Address 100 Vestavia Parkway City-ST-Zip Birmingham, AL 35216