2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2007
Secretary of State

DOCUMENT# N05000001066

Entity Name: NATIONAL ASSOCIATION OF NON-CUSTODIAL MOMS, INC.

Current Principal Place of Business:

11335 SUSAN'S POINT DRIVE
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

11335 SUSAN'S POINT DRIVE
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 56-2499916 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JORDAN, EDWARD P II, ESQ
1460 EAST HIGHWAY 50
CLERMONT, FL 34711 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: PT ( ) Delete
Name: MORRIS, BEVERLY
Address: 11335 SUSAN'S POINT DRIVE
City-St-Zip: CLERMONT, FL 34711

Title: V ( ) Delete
Name: PAGANO, ANNETTE
Address: 8 KENDALL WAY
City-St-Zip: NASHUA, NH 06032

Title: V ( ) Delete
Name: BRYAN, ANITA
Address: 3000 P STREET
City-St-Zip: LINCOLN, NE 68503

Title: S ( ) Delete
Name: CHAPPELL-BATES, CELESTE
Address: 3162 GRIGGSVIEW COURT
City-St-Zip: COLUMBUS, OH 43221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change ( ) Addition
Name: CHAPELL-BATES, CELESTE
Address: 3162 GRIGGSVIEW COURT
City-St-Zip: COLUMBUS, OH 43221

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BEVERLY MORRIS P 01/03/2007

Electronic Signature of Signing Officer or Director — Date