

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002357

FILED
Jan 18, 2008
Secretary of State

Entity Name: NATIONAL ASSOCIATION OF COMMUNITY DEVELOPMENT EXTENSION PROFESSIONALS,
INCORPORATED

Current Principal Place of Business:

9231 NW 10TH PLACE
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

9231 NW 10TH PLACE
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 20-2982555 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

COTHRAN, HENRY M
9231 NW 10TH PLACE
GAINESVILLE, FL 32606 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: PRES () Delete
Name: SENESE, RICHARD
Address: 467 COFFEY HALL 1420 ECKLES AVE
City-St-Zip: ST. PAUL, MN 55108 US

Title: VP () Delete
Name: MICHAEL, WOODS
Address: 308 AG HALL
City-St-Zip: STILLWATER, OK 74078 US

Title: TRES () Delete
Name: COTHRAN, HENRY M
Address: 9231 NW 10TH PLACE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: SEC () Delete
Name: TOOTLE, DEBORAH M
Address: 101 AG ADMINISTRATION BLDG. LSU
City-St-Zip: BATON ROUGE, LA 70803 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WOODS, MICHAEL
Address: 308 AG HALL
City-St-Zip: STILLWATER, OK 74078 US

Title: VP (X) Change () Addition
Name: JONES, EDWIN
Address: BOX 7653
City-St-Zip: RALEIGH, NC 27695 US

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: HENRY M. COTHRAN

TRES

01/18/2008

Electronic Signature of Signing Officer or Director

Date