

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002357

FILED  
Feb 17, 2011  
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  
Name: TOOTLE, DEBORAH  
Address: PO BOX 391  
City-St-Zip: LITTLE ROCK, AR 72204 US

Title: VP  
Name: BORICH, TIM  
Address: 126 COLLEGE OF DESIGN  
City-St-Zip: AMES, IA 50010 US

Title: TRES  
Name: DAVIS, GREG  
Address: 231 AG ADMIN 2120 FYFFE ROAD  
City-St-Zip: COLUMBUS, OH 43210 US

Title: SEC  
Name: DARGER, MICHAEL  
Address: 1420 ECKLES AVE  
City-St-Zip: ST. PAUL, MN 55108 US

I hereby 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 all other like empowered.

SIGNATURE: HENRY COTHRAN

RA

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date