2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2009
Secretary of State

DOCUMENT# N05000007015

Entity Name: FBI NATIONAL CITIZENS' ACADEMY ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

18560 N. DALE MABRY HIGHWAY
LUTZ, FL 33548

New Principal Place of Business:

Current Mailing Address:

18560 N. DALE MABRY HIGHWAY
LUTZ, FL 33548

New Mailing Address:

FEI Number: 20-3269302 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WESTER, MEREDITH
18560 N. DALE MABRY HIGHWAY
LUTZ, FL 33548 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: MOTZER, EARL
Address: 3505 LOUISVILLE RD
City-St-Zip: SALVISA, KY 40372

Title: V ( ) Delete
Name: MULCAHY, MARK
Address: 440 SOUTH BENTLEY AVE
City-St-Zip: LOS ANGELES, CA 90049

Title: S ( ) Delete
Name: MITCHELL, BOBBI
Address: 2964 WILLIAMSBRIDGE RD #6C
City-St-Zip: BRONX, NY 10467

Title: T ( ) Delete
Name: WESTER, MEREDITH
Address: 18560 N. DALE MABRY HIGHWAY
City-St-Zip: LUTZ, FL 33548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition
Name: WILLIGER, STEPHEN D
Address: 3900 KEY CENTER 127 PUBLIC SQUARE
City-St-Zip: CLEVELAND, OH 44114

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: MEREDITH WESTER T 04/02/2009

Electronic Signature of Signing Officer or Director — Date