

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008849

FILED
May 01, 2008
Secretary of State

Entity Name: ASSEMBLY ON LITERATURE FOR ADOLESCENTS OF THE NCTE, INC.

Current Principal Place of Business:

83 CREED CIRCLE
CAMPBELL, OH 44405 US

New Principal Place of Business:

Current Mailing Address:

P. O BOX 234
CAMPBELL, OH 44405 US

New Mailing Address:

FEI Number: 90-0066810 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KAYWELL, JOAN F
1303 N. RIVERHILL DR.
TEMPLE TERRACE, FL 33617 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: KELLY, KATHRYN
Address: 150 WOODEN SHOE CT N
City-St-Zip: CHRISTIANBURG, VA 24073 US

Title: VP () Delete
Name: GILL, DAVID
Address: UNIVERSITY OF NORTH CAROLINA/WILMINGTON
City-St-Zip: WILMINGTON, NC 28403 US

Title: ESEC () Delete
Name: SALVNER, GARY
Address: YOUNGSTOWN STATE UNIVERSITY/ENGLISH DEPT.
City-St-Zip: YOUNGSTOWN, OH 44555 US

Title: TREA () Delete
Name: FORD, MARGARET J
Address: 83 CREED CIRCLE
City-St-Zip: CAMPBELL, OH 44405 US

Title: MSEC () Delete
Name: KAYWELL, JOAN K
Address: 1303 N. RIVERHILL DR.
City-St-Zip: TEMPLE TERRACE, FL 33617 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GILL, DAVID
Address: 314 SEMMES DRIVE
City-St-Zip: WILMINGTON, NC 28412 US

Title: VP (X) Change () Addition
Name: CARROLL, PAMELA S
Address: FLORIDA STATE UNIVERSITY
City-St-Zip: TALLAHASSEE, FL 32306 US

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

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: MARGARET J. FORD

TREA

05/01/2008

Electronic Signature of Signing Officer or Director

Date