

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005846

FILED  
Jun 22, 2010  
Secretary of State

**Entity Name:** NATIONAL ASSOCIATION OF LEGAL BOOKKEEPERS, INC.

**Current Principal Place of Business:**

2277 SW 19 STREET  
MIAMI, FL 33145

**New Principal Place of Business:**

223 E FLAGLER STREET  
518  
MIAMI, FL 33131

**Current Mailing Address:**

2277 SW 19 STREET  
MIAMI, FL 33145

**New Mailing Address:**

223 E FLAGLER STREET  
518  
MIAMI, FL 33131

**FEI Number:** 27-0375542

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MILIA LOPEZ, BEATRIZ  
2277 SW 19 STREET  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

MILIA LOPEZ, BEATRIZ  
223 E FLAGLER STREET  
518  
MIAMI, FL 33131 US

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: BEATRIZ MILIA LOPEZ

06/22/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MILIA LOPEZ, BEATRIZ  
Address: 2277 SW 19 STREET  
City-St-Zip: MIAMI, FL 33145

Title: VP  
Name: MEDINA, LISA M  
Address: 223 E FLAGLER ST, STE 518  
City-St-Zip: MIAMI, FL 33131

Title: VP  
Name: DE ROCHEFORT, NICOLAS C  
Address: 223 E FLAGLER ST, STE 518  
City-St-Zip: MIAMI, FL 33131

Title: VP  
Name: ZIMMERMAN, EDITH G  
Address: 223 E FLAGLER ST, STE 518  
City-St-Zip: MIAMI, FL 33131

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: BEATRIZ MILIA LOPEZ

P

06/22/2010

Electronic Signature of Signing Officer or Director

Date