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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

NATIONAL ASSOCIATION OF STATE VOCAL ORGANIZATION

FILED Jan 27 1997 8:00am Secretary of State



Principal Place	of Business	Mailing Address				T TO BITTER BY BY THE CHARLE THE BY T				
7485 EAST KENYON AVE. DENVER CO 80237		7485 EAST KENYON AVE. DENVER CO 80237-1316								
						3. Date incorporated or Qualified 06/03/1987	3a. Date o	f Last Re /14/19		
2. Principal Pl	ace of Business	2a. Mailing Address 26				4. FEI Number 59-2845782		plied For Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$		dditional	
City & State		City & State			···········	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip	Co	untry		8. This corporation has liability for	intangible tax			
24	25	29	30			. 1011000 010(41140	Yes N			
	9. Name and Address of Curre	nt Registered Agent		1		10. Name and Address of New Re	glatered Age	nt		
				81	Name					
RESIDENT AGENT CORPORATION OF PINELLAS CTY 980 TYRONE BLVD., NORTH				82	Street /	Address (P.O. Box Number is Not Acceptable)				
	ERSBURG FL 33710			83						
				84	City		FL ⁸	5 Zip (ode	
SIGNATURE _	to the provisions of Sections 617.05 egistered agent, or both, in the Stat in familiar with, and accept the obligations are typed or printed name of registered at					corporation submits this statement for the poration's board of directors. I hereby acception to the property of the property o	ourpose of chapt the appoint	anging It ment as	s registered registered	
12.		ND DIRECTORS	13		•	ADDITIONS/CHANGES TO OFFIC	ERS AND DI	RECTOR	S IN 12	
TITLE	DP	☐ DELETE	1.1	TITLE		D		Change	Addition	
NAME	WIMBERLY, GEORGE		1.2	NAME	1	L. NELSON MCALEXANDER			Ì	
STREET ADDRESS	THE PART OF STREET			STREET	address	8535 Baymeadows Rd., Suite 44				
CITY-ST-ZIP	TUCSON AZ			CITY-SI	- 1	JACKSONVILLE, FL 3225				
TITLE	VD DELETE					D		Change	Addition	
NAME	GRAHAM, JEAMBEY		2.2	2.2 NAME		KATHERINE ROBINSON				
STREET ADDRESS	7485 E. KENYON AVE.		2.3	2.3 STREET ADDRESS		6980 MAPLE N.W. #2				
CITY-ST-ZIP	DENVER CO 80237		2. 4	CITY-S	T-ZIP	WASHINGTON, D.C. 2	20012			
TITLE	DS DELETE					D		Change	Addition .	
NAME	WIMBERLY, LESLEY		3.2	NAME	Ì	DONNA TURNER				
STREET ADDRESS	11625 EAST OLD SPANISH	TRAIL	3.3	STREET	ADDRESS	P.O. BOX 9182 N/A				
City-St-ZIP	ZIP TUCSON AZ		3.4.	CITY-S	T- 21P	CHANDLER HEIGHTS,	AZ 852	227		
TiTLE	D	DELETE	4.1	TITLE		D		Change	Addition	
NAME	DARLEY, MIKE		4. 2	NAME		VERNON FOSTER				
STREET ADDRESS	16630 IMPERIAL VALLEY DI	r. Suite 255	4.3	STREET	address	1933 WEST MAIN STE	REET.	[‡] 5 1	74	
CITY-ST-ZIP	HOUSTON TX		4.4	CITY-S	r - ZIP	MESA, AZ 85201				
TITLE			5.1	5.1 TITLE D		Ð		Change	Addition	
NAME	OWENS, TOM		5.2	NAME		LINDARUTH ESTES				
STREET ADDRESS	P.O. BOX 892 N/A		5.3	STREET	address	P.O. BOX 9182 N/A				
CITY-ST-ZIP	NASH TX 75569		5.4	CITY-S	T-ZIP	CHANDLER HEIGHTS,				
TITLE	D	☐ DELETE	6.1	TITLE		,		Change	Addition	
NAME	RUPP, AL			NAME						
STREET ADDRESS	P.O. BOX 152736 N/A		6.3	STREET	ADORESS	1.				
CITY-ST-ZIP	SANDIEGO CA 92195		6.4	CITY-S	1 zef	<u> </u>				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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 in Block 12 or Block 13 if phanged on on an attachment with an address.