2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22917

Apr 30, 2009 Secretary of State

Entity Name: NATIONAL MOBILITY EQUIPMENT DEALERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3327 W. BEARSS AVE TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

3327 W. BEARSS AVE TAMPA, FL 33618

FEI Number: 59-2930516 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ROELING, DANA L 3327 W. BEARSS AVE TAMPA, FL 33618

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS: () Delete

ALLEN, JOE Name: 3-1140 SHEPPARD AVE W Address:

City-St-Zip: TORONTO, ONTARIO, CN M3K2A2

Title: () Delete SMITH, MARCUS Name: Address: 17-900 HWY 77

City-St-Zip: GROSSE TETE, LA 70740

Title: () Delete ROELING, DANA L Name: 3327 W. BEARSS AVE. Address:

City-St-Zip: TAMPA, FL 33618

Title: () Delete Name: NUNN, ROBERT

Address: 330 SHELDON DR

City-St-Zip: CAMBRIDGE, ON N1T AA9

(X) Change () Addition WRIGHT, TOM Name:

Address: 175 E-I30 City-St-Zip: GARLAND, TX 75049

Title: VΡ (X) Change () Addition Name: COOK, SAM

Address: 4734 ROCKFORD PL City-St-Zip: LOUISVILLE, KY 40216

Title: CEO (X) Change () Addition

HUBBARD, DAVID Name: Address: 3327 W. BEARSS AVE. City-St-Zip: TAMPA, FL 33618

Title: (X) Change () Addition

Name: SIEBERT, BILL

405 COOLIDGE STREET Address: City-St-Zip: GLENWOOD, IA 51535

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: DAVID HUBBARD CEO 04/30/2009