

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22917

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** NATIONAL MOBILITY EQUIPMENT DEALERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3327 W. BEARSS AVE  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

3327 W. BEARSS AVE  
TAMPA, FL 33618

**New Mailing Address:**

**FEI Number:** 59-2930516

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

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

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

HUBBARD, DAVID  
3327 W. BEARSS AVE  
TAMPA, FL 33618 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: DAVID HUBBARD

01/06/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: WRIGHT, TOM  
Address: 175 E-I30  
City-St-Zip: GARLAND, TX 75049

Title: VP  
Name: COOK, SAM  
Address: 4734 ROCKFORD PL  
City-St-Zip: LOUISVILLE, KY 40216

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

Title: P  
Name: SIEBERT, BILL  
Address: 405 COOLIDGE STREET  
City-St-Zip: GLENWOOD, IA 51535

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: DAVID HUBBARD

CEO

01/06/2010

Electronic Signature of Signing Officer or Director

Date