2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005 8:00 am
Secretary of State
04-15-2005 90076 026 ****61.25

DOCUMENT # N43425

1. Entity Name
NATIONAL ASSOCIATION OF SCHOOL RESOURCE OFFICERS, INC.

Principal Place of Business	Mailing Address
~~1601 N.E. 100TH STREET~~	~~P.O. BOX 39~~
~~ANTHONY, FL 32617~~ US	~~OSPREY, FL 34229~~ US

03282005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
7733 Holiday Dr.	7733 Holiday Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sarasota FL.	City & State: Sarasota FL
Zip: 34231 Country: USA	Zip: 34231 Country: USA

4. FEI Number: 65-0612863 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MARINO, PAUL J. ESQ 611 DRUID ROAD EAST SUITE 512 CLEARWATER, FL 33756	Name: Paul Marino Street Address (P.O. Box Number is Not Acceptable): 251 Windward Passage Suite G City: Clearwater FL Zip Code: 33767

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Paul Marino 4-11-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SHERLING, KATHY 1601 N.E. 100 STREET ANTHONY, FL 32617	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MD LAVARELLO, CURTIS 1019 OAK MEADOW LANE OSPREY, FL 34229	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MD Lavarello, Curtis 4114 Central Sarasota Pkwy. #1125 Sarasota, FL 34238 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BURKE, SEAN P.O. BOX 1613 LAWRENCE, MA 01841	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Burke, Sean P.O. Box 1613 Lawrence MA 01841 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KOTNOUR, JOHN 14662 S. CONSTANCE OLATHE, KS 66062	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Kotnour, John 14662 S. Constance Olathe, KS 66062 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NOLAN, KEVIN 12 MORRISON RD. WINDHAM, NH 03087	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Nolan, Kevin 12 Morrison Rd Windham, NH 03087 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WOOLLEN, TONY 2512 W. 83RD TERRACE LEAWOOD, KS 66206	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S-T Woollen, Tony 9617 Lee Blvd. Leawood KS 66206 ☑ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Paul J. Marino Registered Agent 4/11/05 727-224-2488
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #