2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43425

FILED Jul 14, 2008 Secretary of State

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

Current P	rincipal Place of Business:	New Principal Place of Business:
	DDLANE DR	rew i interpar i tace di Busiliess.
	UL, MN 55125 US	
Current M	lailing Address:	New Mailing Address:
	DDLANE DR UL, MN 55125 US	
In accordan	: 65-0612863 FEI Number Applied For (ce with s. 607.193(2)(b), F.S., the corporation I Address of Current Registered Ager	did not receive the prior notice.
	PAUL J ESQ /ARD PASSAGE	
	ATER, FL 33767 US	
	named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATU	RE:	
	Electronic Signature of Registere	d Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	P () Delete OSBURN, CARL 1217 MEADOWBEND CT ALLEN, TX 75002 US	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VP () Delete NOLAN, KEVIN 12 MORRISON RD WINDHAM, NH 03087	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VP () Delete CARR, JEFFERY 2532 HILLSIDE HEIGHTS DR. GREEN BAY, WI 54311	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	ST () Delete BRIDGES, DONALD 3997 WHISPERING MEWADOW DR. RANDALLSTOWN, MD 21133	Title: () Change () Addition Name: Address: City-St-Zip:
Title:	VP () Delete ORTON, BARRY	Title: () Change () Addition Name: Address:
Name: Address: City-St-Zip:	#4 HIGH MESA PLACE RICHARDSON, TX 75080	City-St-Zip:

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: RICHARD CASTER ED 07/14/2008