

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 30, 2007
Secretary of State

DOCUMENT# N47122

Entity Name: NATIONAL WHEELCHAIR SPORTS FUND, INC.**Current Principal Place of Business:**251 S COUNTY RD
PALM BEACH, FL 33480 US**New Principal Place of Business:**123 N. CONGRESS AVE.
#340
BOYNTON BEACH, FL 33426 US**Current Mailing Address:**251 S. COUNTY ROAD
PALM BEACH, FL 33480 US**New Mailing Address:**123 N. CONGRESS AVE.
#340
PALM BEACH, FL 33426 US**FEI Number:** 58-1727596**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SIMS, H. BRYANT
7301 S DIXIE HWY.
WEST PALM BCH., FL 33405 US**Name and Address of New Registered Agent:**H. BRYANT SIMS
250 ESSEX LANE
WEST PALM BCH., FL 33405 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: H. BRYANT SIMS

08/30/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: KARR, VERENA S
Address: 3595 ROYAL TERN CIRCLE
City-St-Zip: BOYNTON BCH, FL 33436 US

Title: VD () Delete
Name: FISHER, LESTER B JR.
Address: 127 E CIRCLE
City-St-Zip: JEFFERSON CITY, MO 65109 US

Title: PD () Delete
Name: KARR, BRUCE L
Address: 3595 ROYAL TERN CIRCLE
City-St-Zip: BOYNTON BCH., FL 33436 US

Title: D () Delete
Name: COOPER, RICHARD F JR
Address: 4205 REMINGTON PARK COURT
City-St-Zip: FLOWER MOUND, TX 75028 US

Title: D () Delete
Name: FAIRBANKS, WILLIAM B
Address: 3504 E BARON CT
City-St-Zip: ORANGE, CA 92869 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: BRUCE L. KARR

PRES

08/30/2007

Electronic Signature of Signing Officer or Director

Date