2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001940

Entity Name: NPMA FOUNDATION, INC.

FILED Jan 13, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
SUITE 400	HIGHWAY 19 TER, FL 3376					
Current Mailing Address:				New Mailing Address:		
SUITE 400	HIGHWAY 19 TER, FL 3376					
FEI Number:	59-3203441	FEI Number Applied For ()	FEI Number Not App	olicable () Certifica	ate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and	d Address of New Reg	jistered Agent:	
SUITE 400 CLEARWA The above in the State	HIGHWAY 19 TER, FL 3376 named entity st of Florida.		irpose of changing	its registered office or r	egistered agent, or both,	
SIGNATURE: Electronic Signature of Registered Agent			nt		Date	
OFFICERS	AND DIRECT			NS/CHANGES TO OFF	FICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	CROSS, CHERI 11216 CONCOR KNOXVILLE, TN	D WOODS DRIVE 37922 US Delete EPHEN J BTON ST	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	() Change V (X) Change IANNACONE, CARL 132 PROSPECT TRAIL NORTH LITTLE ROCK, A	()Addition	
Title: Name: Address: City-St-Zip: Title: Name:	MCFARLAND, KA 10847 65TH STR PINELLAS PARK	EET NORTH , FL 33782 US Delete	Title: Name: Address: City-St-Zip: Title: Name:	D (X) Change GOODSON, NANCY 1820 E. SHEENA DR. PHOENIX, AZ 85022 US	. ,	
Address: City-St-Zip: Title: Name: Address: City-St-Zip:	19120 CENTRE LUTZ, FL 33558	ROSE BLVD US Delete M ERRACE	Address: City-St-Zip: Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	D () Change WHITSON, MARCIA 4137 W BEAVER CREEK POWELL, TN 37849	. ,	

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: PAUL NESBITT DIR. 01/13/2009