2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004707

FILED Feb 27, 2009 Secretary of State

Entity Name: NATIONAL ASSOCIATION OF WEDDING PROFESSIONALS, INC.

Current Principal Place of Business: New Principal Place of Business: 2150 SEBASTIAN CT ALVA, FL 33920 **Current Mailing Address: New Mailing Address:** 2150 SEBASTIAN CT ALVA, FL 33920 US FEI Number: 65-0446793 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TOTTERDALE, SUZANNE 2150 SEBASTIAN CT ALVA, FL 33920 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: NPD (X) Change () Addition () Delete BENFORADO, LORI NPD TOTTERDALE, SUZANNE NPD Name: Name: 5560 BURNHAM COURT Address: 2150 SEBASTIAN CT Address: City-St-Zip: NORTH FT MYERS, FL 33903 US City-St-Zip: ALVA, FL 33920 US Title: PD () Delete Title: PD (X) Change () Addition MANSIKA, JOHN Name: RISTER, DAVID Name: Address: 3093 52ND STREET S W Address: PO BOX 80791 City-St-Zip: NAPLES, FL 34116 US City-St-Zip: CHARLESTON, SC 29416 US Title: 1VPD () Delete Title: () Change () Addition ETAYO, MAYRA 1VPD Name: Name: Address: PO BOX 277951 Address: City-St-Zip: MIRAMAR, FL 33027 US City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: MARRON, BRENDA TD Name: 5560 BURNHAM COURT Address: Address: City-St-Zip: NORTH FT MYERS, FL 33903 US City-St-Zip: Title: CD () Delete Title: SEC (X) Change () Addition MANSIKA, JOHN Name: Name: ROSENTHAL, STUART 2721 BRANCH LANE 14631 GLEN COVE DR #1601 Address: Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: FORT MYERS, FL 33919 Title: () Delete Title: () Change () Addition TOTTERDALE, SUZANNE Name: Name: Address: 2150 SEBASTIAN CT Address: ALVA, FL 33920 City-St-Zip: 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: SUZANNE TOTTERDALE PRES 02/27/2009