

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P37542

FILED
Mar 31, 2009
Secretary of State

Entity Name: NORTH AMERICAN COUNCIL ON ADOPTABLE CHILDREN, INC.

Current Principal Place of Business:

970 RAYMOND AVE
STE 106
ST. PAUL, MN 551141149 US

New Principal Place of Business:

Current Mailing Address:

970 RAYMOND AVE
STE 106
ST. PAUL, MN 551141149 US

New Mailing Address:

FEI Number: 51-0188951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KREITZ, GAIL
611 NORTHWEST 45TH AVENUE
COCONUT CREEK, FL 33066 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: CRUMBLEY, JOSEPH
Address: 261 OLD YORK RD., STE. 521
City-St-Zip: JENKINTOWN, PA 19046

Title: D () Delete
Name: KROLL, JOE
Address: 970 RAYMOND AVE, STE 106
City-St-Zip: ST PAUL, MN 55114

Title: TD () Delete
Name: FIX, CHERYL
Address: 110 MEDANA ST
City-St-Zip: VICTORIA, BC V8V 2H5

Title: VD () Delete
Name: SCARTH, SANDRA
Address: 7148 BRENTWOOD DRIVE
City-St-Zip: BRENTWOOD BAY, BC V8M 1B7, CA

Title: SD () Delete
Name: STEVENS, PHYLLIS
Address: 478 MOYER RD
City-St-Zip: HARLEYSVILLE, PA 19438

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: WALLING, WRIGHT
Address: 121 SOUTH 8TH ST., SUITE 1100
City-St-Zip: MINNEAPOLIS, MN 55402

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: JOE KROLL

MR.

03/31/2009

Electronic Signature of Signing Officer or Director

Date