

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P37542

FILED  
Jan 07, 2011  
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: P  
Name: MCCROY, RUTH  
Address: 200 P STREET APR. C31  
City-St-Zip: SACRAMENTO, CA 95814

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

Title: T  
Name: WALLING, WRIGHT  
Address: 121 SOUTH 8TH ST., SUITE 1100  
City-St-Zip: MINNEAPOLIS, MN 55402

Title: VP  
Name: CORREA-ROMERO, FELIX  
Address: PASEO LAS VISTAS C-51 CALLE 2  
City-St-Zip: SAN JUAN, PR 00926

Title: S  
Name: JOHN, LEVESQUE  
Address: 86 LOVEITTS FIELD RD  
City-St-Zip: SOUTH PORTLAND, ME 94106

I hereby 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 all other like empowered.

SIGNATURE: JOE KROLL

D

01/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date