2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713021

Entity Name: NATIONAL COUNCIL OF LOCAL ADMINISTRATORS OF

CAREER AND TECHNICAL EDUCATION, INC.

FILED Feb 15, 2015 Secretary of State CC4325146425

Current Principal Place of Business:

6628 WILD ROSE LANE ATTN: THOMAS APPLEGATE WESTERVILLE, OH 43082

Current Mailing Address:

PO BOX 2473

ATTN: THOMAS APPLEGATE

WESTERVILLE, OH 43086-2473 US

FEI Number: 59-6178162 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

APPLEGATE, THOMAS N 1821 DEL WEBB BLVD E

SUN CITY CENTER, FL 33573-6904 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: THOMAS N. APPLEGATE

02/15/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	MDT	Title	DIRECTOR
Name	APPLEGATE, THOMAS N	Name	HUGHES, DWIGHT
Address	6628 WILD ROSE LANE	Address	3921 34TH STREET
City-State-Zip:	WESTERVILLE OH 43082	City-State-Zip:	WOODWARD OK 73801
Title	PAST PRESIDENT	Title	PRESIDENT
Name	MULVEY, NANCY	Name	BUSSEY, WILLIAM
Address	6375 HARRISON AVENUE	Address	400 RICHARDS ROAD

City-State-Zip: CINCINNATI OH 45247 City-State-Zip:

TitleDTitleDNamePAIST, GERALDNameHUGHES, DAVID

Address 240 SYKES STREET Address 101COLLEGE DRIVE

City-State-Zip: PALMER M 45241 City-State-Zip: HOT SPRINGS AR 71913

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: THOMAS N. APPLEGATE

EXECUTIVE DIRECTOR

ZANESVILLE OH 43701

02/15/2015