

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007015

Entity Name: FBI NATIONAL CITIZENS ACADEMY ALUMNI ASSOCIATION, INC.**FILED**
Mar 14, 2021
Secretary of State
9453489606CC**Current Principal Place of Business:**10300 W. CHARLESTON BLVD, STE 13-468
LAS VEGAS, NV 89135**Current Mailing Address:**10300 W. CHARLESTON BLVD, STE 13-468
LAS VEGAS, NV 89135 US**FEI Number: 20-3269302****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**DENBO, TAMMY B ESQ.
8381 GUNN HIGHWAY
TAMPA, FL 33626 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: TAMMY B DENBO****03/14/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER, DIRECTOR
Name SMITH, ANDREW
Address 10300 W. CHARLESTON BLVD, STE 13
 -468
City-State-Zip: LAS VEGAS NV 89135

Title DIRECTOR
Name SMITH, SUE
Address 10300 W. CHARLESTON BLVD, STE 13
 -468
City-State-Zip: LAS VEGAS NV 89135

Title IMMEDIATE PAST PRESIDENT,
 DIRECTOR
Name JENSEN, KEVIN
Address 10300 W. CHARLESTON BLVD, STE 13
 -468
City-State-Zip: LAS VEGAS NV 89135

Title PRESIDENT, DIRECTOR
Name WADAS, ALICIA
Address 10300 W. CHARLESTON BLVD, STE 13
 -468
City-State-Zip: LAS VEGAS NV 89135

Title EXECUTIVE DIRECTOR
Name MANGOLD, SANFORD
Address 317 ONYX CREST ST
City-State-Zip: LAS VEGAS NV 89145

Title DIRECTOR
Name ELSAYED, AMIR
Address 10300 W. CHARLESTON BLVD, STE 13
 -468
City-State-Zip: LAS VEGAS NV 89135

Title SECRETARY, VP, DIRECTOR
Name LORBERBAUM, SALLY
Address 10300 W. CHARLESTON BLVD, STE 13
 -468
City-State-Zip: LAS VEGAS NV 89135

Title SENIOR VICE PRESIDENT, DIRECTOR
Name HOWZE, JASON
Address 10300 W. CHARLESTON BLVD, STE 13
 -468
City-State-Zip: LAS VEGAS NV 89135

Continues on page 2

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: ALICIA WADAS**PRESIDENT****03/14/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP, DIRECTOR
Name NELSON, ED
Address 10300 W. CHARLESTON BLVD, STE 13-468
City-State-Zip: LAS VEGAS NV 89135

Title GENERAL COUNSEL
Name URBAN, JENNIFER L. ESQ.
Address 5354 PARKDALE DR.
STE. 103
City-State-Zip: ST. LOUIS PARK MN 55416

Title DIRECTOR
Name GETROST, ELIZABETH
Address 10300 W. CHARLESTON BLVD, STE 13-468
City-State-Zip: LAS VEGAS NV 89135

Title VP, DIRECTOR
Name CORRIGAN, KAREN
Address 10300 W. CHARLESTON BLVD, STE 13-468
City-State-Zip: LAS VEGAS NV 89135

Title GENERAL COUNSEL
Name SMITH, CHARLES R ESQ.
Address 600 E SPEEDWAY
City-State-Zip: TUCSON AZ 85705