

2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005504

FILED
Apr 25, 2013
Secretary of State
CC5133369113**Entity Name:** SERVICE CORPS OF RETIRED EXECUTIVES ASSOCIATION
INC.**Current Principal Place of Business:**1175 HERNDON PARKWAY
HERNDON, VA 20170**Current Mailing Address:**1175 HERNDON PARKWAY
900
HERNDON, VA 20170**FEI Number: 52-1067290****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CEO
Name	YANCEY, JR, W KENNETH
Address	21380 CLAPPERTOWN DR
City-State-Zip:	ASHBURN VA 20147

Title	CFO
Name	FUQUA, JOHN
Address	1175 HERNDON PARKWAY #900
City-State-Zip:	HERNDON VA 20170

Title	SECRETARY
Name	OGATA, KEITH
Address	1056 IKENA CIRCLE
City-State-Zip:	HONOLULU HI 96821

Title	DIRECTOR
Name	MARTIN, BAUMANN F
Address	424 RYDER ROAD
City-State-Zip:	MANHASSEST NY 11030

Title	DIRECTOR
Name	BLANKE, GAIL
Address	70 EAST 55TH STREET, 21ST FLOOR
City-State-Zip:	NEW YORK NY 10022

Title	DIRECTOR
Name	CAMPBELL, JOHN
Address	P.O. BOX 74
City-State-Zip:	MONUMENT BEACH MA 02553

Title	DIRECTOR
Name	CARRANZA, JOVITA
Address	9715 WOODS DRIVE #2002
City-State-Zip:	SKOKIE IL 60077

Title	DIRECTOR
Name	EVERS , RIDGELY
Address	1195 WESTSIDE ROAD
City-State-Zip:	HEALDSBURG CA 95448

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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: JOHN FUQUA**VP OF FINANCE****04/25/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FINNERTY, WILLIAM
Address 2981 22ND STREET SOUTH
City-State-Zip: ARLINGTON VA 22204

Title BOARD CHAIR
Name GLENN, JERRY
Address 914 HIGHMEADOW CT.
City-State-Zip: LANCASTER PA 17601

Title DIRECTOR
Name RADEWALD, LAURA
Address 4 FLETCHER PLACE
City-State-Zip: HOPKINS MN 55305

Title DIRECTOR
Name SMITH, JOSHUA I
Address 8401 COLESVILLE ROAD
620
City-State-Zip: SILVER SPRING MD 20910

Title DIRECTOR
Name GOODMAN, GAIL
Address 1601 TRAPELO ROAD
SUITE 329
City-State-Zip: WALTHAM MA 02451

Title TREASURER
Name PELKA, LAWRENCE
Address 179 E. LAKE SHORE DRIVE #14E
City-State-Zip: CHICAGO IL 60611

Title VICE CHAIR
Name SHELTON, HAL
Address 5828 EDSON LANE
City-State-Zip: N. BETHESDA MD 20852

Title DIRECTOR
Name TRAYLOR, MARGIE
Address 740 SOUTH MILL AVENUE
210
City-State-Zip: TEMPE AZ 85281