2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2023
Secretary of State
9764695125CC

DOCUMENT# P37542

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

Current Principal Place of Business:

970 RAYMOND AVE
STE 205
ST. PAUL, MN 55114-1149

Current Mailing Address:

970 RAYMOND AVE
STE 205
ST. PAUL, MN 55114-1149 US

FEI Number: 51-0188951

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLARK, BARB
24 GOURDS COURT EAST
HOMOSASSA, FL 34446 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: BARB CLARK 05/12/2023

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	GOODMAN, DENISE PHD
Address	1824 SNOUFFER RD.
City-State-Zip:	WORTHINGTON OH 43085

Title	DIRECTOR
Name	MURPHY, CATHY
Address	ADOPTION COUNCIL OF CANADA 416-2249 CARLING AVENUE
City-State-Zip:	OTTAWA ON K2B 7E9

Title	EXECUTIVE DIRECTOR
Name	CUSHMAN, LIGIA
Address	970 RAYMOND AVENUE SUITE 205
City-State-Zip:	SAINT PAUL MN 55114

Title	DIRECTOR
Name	MELENDEZ, JAREL
Address	CIRCLE OF YOUTH LAWYERS FOR CHILDREN 110 LAFAYETTE ST., 8TH FLOOR
City-State-Zip:	NEW YORK NY 10013

Title	DIRECTOR
Name	MASON, STACEY ANN
Address	345 LENOX RD 7B CITIGROUP
City-State-Zip:	BROOKLYN NY 11228

Title	TREASURER
Name	O'BRIEN, PAT
Address	ADOPTIVE AND FOSTER FAMILY COALITION OF NEW YORK (AFFCNY) 2855 W. 20TH STREET
City-State-Zip:	BROOKLYN NY 11224-2515

Title	VP
Name	GRZYBOWSKI, KIM
Address	LALUM'UTUL' SMUN' EEM CHILD & FAMILY SERVICES 5932 JAYNES ROAD
City-State-Zip:	DUNCAN V9L 4W8

Title	VP
Name	BROWN, KIM
Address	CAPITAL ADOPTIVE FAMILIES ALLIANCE 6875 POCA MONTOYA DRIVE
City-State-Zip:	GRANITE BAY CA 95746-7355

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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: LIGIA CUSHMAN EXECUTIVE DIRECTOR 05/12/2023

Officer/Director Detail Continued :

Title	DIRECTOR
Name	KIM, JAERAN
Address	UNIVERSITY OF WASHINGTON TACOMA, SOCIAL WORK AND CRIMINAL JUSTICE PROGRAM 1900 COMMERCE STREET 205 PETERS HALL
City-State-Zip:	TACOMA WA 98402

Title	DIRECTOR
Name	ZAHLER, MERCEDES
Address	4701 NE 72ND AVE UNITE 263
City-State-Zip:	VANCOUVER WA 98661

Title	SECRETARY
Name	FAULKNER, RONYA
Address	TENNESSEE DEPARTMENT OF CHILDREN'S SERVICES 200 ATHENS WAY, THIRD FLOOR, SUITE C
City-State-Zip:	NASHVILLE TN 37243

Title	DIRECTOR
Name	SIMMONS, DAVID
Address	5100 SW MACADAM AVE STE 300
City-State-Zip:	PORTLAND OR 97239-3878