

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23507

Entity Name: NATIONAL MANAGEMENT RESOURCES CORPORATION**Current Principal Place of Business:**113 CORPORATE PARK EAST DRIVE
PO BOX 1224
LAGRANGE, GA 30241**Current Mailing Address:**113 CORPORATE PARK EAST DRIVE
PO BOX 1224
LAGRANGE, GA 30241 US**FEI Number:** 84-0755858**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NATIONAL CORPORATE RESEARCH,LTD.,INC.
115 NORTH CALHOUN ST.
SUITE 4
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	CHAIRMAN, DIRECTOR, CFO
Name	HOPPE, FREDERICK D. JR.
Address	34 WYNNWARD WAY
City-State-Zip:	SHARPSBURG GA 30277

Title	SECRETARY
Name	HOPPE, ELEANOR C
Address	1012 RIVERSIDE DR.
City-State-Zip:	LAGRANGE GA 30240

Title	CEO
Name	HOPPE, RANDY
Address	270 LONG SHORE WAY
City-State-Zip:	NEWNAN GA 30263

Title	PRESIDENT, COO
Name	WILSON, ANDREW J
Address	301 RAINTREE BEND
City-State-Zip:	PEACHTREE CITY GA 30269

Title	ASSISTANT SECRETARY
Name	VITALE, MARY CHRISTINE
Address	111 WEST BROAD STREET
City-State-Zip:	MT. PLEASANT IA 52641

Title	VP, ASST. SECRETARY
Name	CARON, SUSAN
Address	70 TINGLE ROAD
City-State-Zip:	LAGRANGE GA 30240

Title	VICE PRESIDENT OPERATIONS
Name	TOMLINSON, JAMES
Address	105 NORTHRIDGE DRIVE
City-State-Zip:	LAGRANGE GA 30241

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RANDY HOPPE

CEO

04/25/2017

Electronic Signature of Signing Officer/Director Detail_____
Date