

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001694

Entity Name: N A M I INCORPORATED

Current Principal Place of Business:

4301 WILSON BLVD.
SUITE 300
ARLINGTON, VA 22203

Current Mailing Address:

4301 WILSON BLVD.
SUITE 300
ARLINGTON, VA 22203 US

FEI Number: 43-1201653

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCorp SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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: JACKIE DEFILIPPIS

01/28/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name KENNEDY, ADRIENNE
Address 4301 WILSON BLVD.
 SUITE 300
City-State-Zip: ARLINGTON VA 22203

Title SECOND VP
Name FERNANDES, VANESSA
Address 4301 WILSON BLVD.
 SUITE 300
City-State-Zip: ARLINGTON VA 22203

Title CFO
Name LEVY, DAVID S
Address 4301 WILSON BLVD.
 SUITE 300
City-State-Zip: ARLINGTON VA 22203

Title FIRST VP
Name HOLLOWAY, SHIRLEY
Address 4301 WILSON BLVD.
 SUITE 300
City-State-Zip: ARLINGTON VA 22203

Title SECRETARY
Name LARRAURI, CARLOS
Address 4301 WILSON BLVD.
 SUITE 300
City-State-Zip: ARLINGTON VA 22203

Title TREASURER
Name STAFFORD, DAVE
Address 4301 WILSON BLVD.
 SUITE 300
City-State-Zip: ARLINGTON VA 22203

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: DAVID S. LEVY

CFO

01/28/2021

Electronic Signature of Signing Officer/Director Detail

Date