

**2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000001694

**Entity Name:** NAMI NATIONAL INC.

**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:**

NORTHWEST REGISTERED AGENT LLC  
7901 4TH ST N  
STE 300  
ST. PETERSBURG, FL 33702 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:** KATHRYN PICKETT

03/04/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            CAMPBELL, JOYCE A.  
Address        4301 WILSON BLVD.  
                 SUITE 300  
City-State-Zip: ARLINGTON VA 22203

Title            SECOND VP  
Name            GATTO, JOSEPH  
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            NACARRO, CATHERINE  
Address        4301 WILSON BLVD.  
                 SUITE 300  
City-State-Zip: ARLINGTON VA 22203

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

Title            TREASURER  
Name            FLADEN, JEFF  
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

03/04/2024

Electronic Signature of Signing Officer/Director Detail

Date