2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2009
Secretary of State

DOCUMENT# F94000002839

Entity Name: POPULATION CONNECTION, INC.

Current Principal Place of Business:

2120 L ST. NW
SUITE 500
WASHINGTON, DC 20037

New Principal Place of Business:

Current Mailing Address:

2120 L ST. NW
SUITE 500
WASHINGTON, DC 20037

New Mailing Address:

FEI Number: 94-1703155 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
STE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	SEAGER, JOHN	
Address:	2120 L ST. NW, STE 500	
City-St-Zip:	WASHINGTON, DC 20037	
Title:	V	( ) Delete
Name:	DIXON, BRIAN	
Address:	2120 L ST. NW, STE 500	
City-St-Zip:	WASHINGTON, DC 20037	
Title:	V	( ) Delete
Name:	WASSERMAN, PAM	
Address:	2120 L ST. NW, STE 500	
City-St-Zip:	WASHINGTON, DC 20037	
Title:	D	( ) Delete
Name:	DAULS, SHELLEY	
Address:	2120 L ST. NW, STE 500	
City-St-Zip:	WASHINGTON, DC 20037	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN SEAGER P 07/01/2009

Electronic Signature of Signing Officer or Director — Date