

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000324

FILED  
Jan 08, 2009  
Secretary of State

Entity Name: MID-FLORIDA CHAPTER OF NATIONAL INSTITUTE OF GOVERNMENTAL PURCHASING, INC.

## Current Principal Place of Business:

451 3RD ST. NW  
WINTER HAVEN, FL 33881

## New Principal Place of Business:

401 6TH ST. SW  
WINTER HAVEN, FL 33880

## Current Mailing Address:

PO BOX 234  
BARTOW, FL 33831

## New Mailing Address:

FEI Number: 14-1942644      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BISHOP, BOB  
451 3RD ST. NW  
WINTER HAVEN, FL 33881      US

## Name and Address of New Registered Agent:

BISHOP, BOB  
401 6TH ST. SW  
WINTER HAVEN, FL 33880      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

01/08/2009

Date

## OFFICERS AND DIRECTORS:

Title: PPD ( ) Delete  
Name: GELCH, WENDY  
Address: 999 AVE. H NE  
City-St-Zip: WINTER HAVEN, FL 33881

Title: PD ( ) Delete  
Name: STOREY, BUDDY  
Address: 2470 CLOWER LANE  
City-St-Zip: BARTOW, FL 33830

Title: VD ( ) Delete  
Name: ADAMS, LYNN  
Address: 1915 S. FLORAL AVE.  
City-St-Zip: BARTOW, FL 33830

Title: TD ( ) Delete  
Name: BISHOP, BOB  
Address: 451 3RD ST. NW  
City-St-Zip: WINTER HAVEN, FL 33881

Title: SD ( ) Delete  
Name: RAIFORD, MARK  
Address: 1140 EAST PARK ST  
City-St-Zip: LAKELAND, FL 33801

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition  
Name: LORA, MARTIN  
Address: 2470 CLOWER LANE  
City-St-Zip: BARTOW, FL 33830

Title: PPD (X) Change ( ) Addition  
Name: STOREY, BUDDY  
Address: 2470 CLOWER LANE  
City-St-Zip: BARTOW, FL 33830

Title: PD (X) Change ( ) Addition  
Name: ADAMS, LYNN  
Address: 1915 S. FLORAL AVE.  
City-St-Zip: BARTOW, FL 33830

Title: TD (X) Change ( ) Addition  
Name: BISHOP, BOB  
Address: 401 6TH ST. SW  
City-St-Zip: WINTER HAVEN, FL 33880

Title: VD (X) Change ( ) Addition  
Name: RAIFORD, MARK  
Address: 1140 EAST PARK ST  
City-St-Zip: LAKELAND, FL 33801

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: BOB BISHOP

Electronic Signature of Signing Officer or Director

TD

01/08/2009

Date