

**2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000002924

**FILED**  
**Apr 05, 2016**  
**Secretary of State**  
**CC4975742453**

**Entity Name:** LOGISTICS MANAGEMENT INSTITUTE, CORPORATION

**Current Principal Place of Business:**

7940 JONES BRANCH DRIVE  
TYSONS, VA 22102

**Current Mailing Address:**

7940 JONES BRANCH DRIVE  
TYSONS, VA 22102 US

**FEI Number:** 52-0741393

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD  
PLANTATION, FL 33324 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            PRESIDENT, DIRECTOR  
Name            FORD, NELSON  
Address        7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102

Title            SECRETARY  
Name            RATH, MANIK  
Address        7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102

Title            TREASURER  
Name            BECKER, LORI L  
Address        7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102

Title            DIRECTOR  
Name            DANIELS, MICHAEL  
Address        7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102

Title            DIRECTOR  
Name            DAIL, ROBERT  
Address        7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102

Title            DIRECTOR  
Name            DUNWOODY, ANN  
Address        7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102

Title            DIRECTOR  
Name            KELMAN, STEVEN  
Address        7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102

Title            DIRECTOR  
Name            KRIEG, KEN  
Address        7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102

**Continues on page 2**

*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:** MANIK RATH

**SECRETARY**

**04/05/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MCCURDY, DAVE  
Address 7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102

Title DIRECTOR  
Name PERLIN, JONATHAN  
Address 7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102

Title DIRECTOR  
Name SWEETNAM, JAMES  
Address 7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102

Title DIRECTOR  
Name MCGINNIS, PATRICIA  
Address 7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102

Title DIRECTOR  
Name STOTTLEMYER, TODD A.  
Address 7940 JONES BRANCH DRIVE  
City-State-Zip: TYSONS VA 22102