2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# 854893

Entity Name: INTERNATIONAL CITY MANAGEMENT ASSOCIATION RETIREMENT CORPORATION

Current Principal Place of Business:

777 N. CAPITOL ST. , NE
SUITE 600
WASHINGTON, DC 200024240 US

New Principal Place of Business:

Current Mailing Address:

777 N. CAPITOL ST. , NE
SUITE 600-FIN, ATTN: ANDRINE COLEMAN
WASHINGTON, DC 200024240 US

New Mailing Address:

FEI Number: 23-7268394 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: T ( ) Delete
Name: MAUS, GERARD
Address: 777 N CAPIRAL ST NE, STE 600
City-St-Zip: WASHINGTON, DC 200024240

Title: AT ( ) Delete
Name: BENNETT, JOHN
Address: 777 N CAPIRAL ST NE, STE 600
City-St-Zip: WASHINGTON, DC 20002

Title: AT ( ) Delete
Name: STOTLER, BARBARA
Address: 777 N CAPIRAL ST NE, STE 600
City-St-Zip: WASHINGTON, DC 20002

Title: PD ( ) Delete
Name: MCCALLEN, JOAN
Address: 777 N. CAPITOL ST. NE 600
City-St-Zip: WASHINGTON, DC 20002

Title: AT ( ) Delete
Name: GLISTA, ELIZABETH
Address: 777 N CAPITOL ST, NE, STE 600
City-St-Zip: WASHINGTON, DC 20002

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

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

Title: D ( ) Change (X) Addition
Name: KING, NORM
Address: 777 N CAPITOL ST, NE, STE 600
City-St-Zip: WASHINGTON, DC 20002

I hereby certify that the information supplied with this filing does not qualify for the 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: GERARD MAUS T 04/28/2006
Electronic Signature of Signing Officer or Director — Date