

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006820

FILED  
Apr 29, 2006  
Secretary of State

**Entity Name:** IPM INTERNATIONAL (DISTRICT OF COLUMBIA), INC.

**Current Principal Place of Business:**

1447 HWY 69  
P.O. BOX 425  
OSCEOLA, IA 50213

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 11297  
WASHINGTON, DC 20008

**New Mailing Address:**

**FEI Number:** 52-2323965

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DALBY, MAIZIE N  
2001 CAIRO STREET  
P.O. BOX 4477  
PENSACOLA, FL 32507 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: CONRAD, ROBERT  
Address: 1447 HWY 69, PO BOX 425  
City-St-Zip: OSCEOLA, IA 50213

Title: V ( ) Delete  
Name: HAMMOND, BEN  
Address: 1001 SO. 55TH STREET  
City-St-Zip: KANSAS CITY, KS 66106

Title: S ( ) Delete  
Name: OVERSTREET, DAWN  
Address: 929 WINONA AVENUE, SW  
City-St-Zip: ROANOKE, VA 24015

Title: T ( ) Delete  
Name: JOHNSON, MARY  
Address: 503 ROOSEVELT BLVD  
City-St-Zip: FALLS CHURCH, VA 22044

**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: T (X) Change ( ) Addition  
Name: JOHNSON, MARY  
Address: 503 ROOSEVELT BLVD A318  
City-St-Zip: FALLS CHURCH, VA 22044

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: MARY DANIELS JOHNSON

T

04/29/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date