## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000001626

FILED Mar 24, 2009 Secretary of State

Entity Name: NATIONAL INSTITUTE OF GOVERNMENTAL PURCHASING, INC.

**Current Principal Place of Business: New Principal Place of Business:** 151 SPRING STREET HERNDON, VA 201705223 **Current Mailing Address: New Mailing Address:** 151 SPRING STREET HERNDON, VA 201705223 FEI Number: 53-0196623 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BUFFINGTON, KIRK W 100 ANDREWS AVE RM. 619 FT LAUDERDALE, FL 333011016 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GRIMM, RICK CPPO Name: Name: 151 SPRING STREET Address: Address: City-St-Zip: HERNANDON, VA 201705223 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete GRANT, EDMUND J CPPO Name: GRANT, EDMUND J CPPO Name: Address: 4 MOORE ROAD Address: 4 MOORE ROAD CAPE MAY COURT HOUSE, NJ 082101654 City-St-Zip: City-St-Zip: CAPE MAY COURT HOUSE, NJ 082101654 Title: 1VP () Delete Title: (X) Change ( ) Addition BUFFINGTON, KIRK J BUFFINGTON, KIRK J Name: Name: 100 ANDREWS AVE, ROOM 619 100 ANDREWS AVE, ROOM 619 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 333011016 City-St-Zip: FORT LAUDERDALE, FL 333011016 Title: ( ) Delete Title: (X) Change ( ) Addition KLEIN, CHRIS Name: KOESTER, KENNETH CPPO Name: 151 SPRING ST. Address: Address: 151 SPRING ST. City-St-Zip: HERNDON, VA 20170 City-St-Zip: HERNDON, VA 20170 Title: (X) Delete Title: () Change () Addition BACILE, MICHAEL J CPPO Name: Name: PO BOX 51 Address: Address: City-St-Zip: CHESTERFIELD, VA 23832 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition BRENNAN, PAUL J CPPO BRENNAN, PAUL J CPPO Name: Name: Address: 50 SANATORIUM ROAD, BUILDING A Address: 50 SANATORIUM ROAD, BUILDING A POMONA, NY 109703554 POMONA, NY 109703554 City-St-Zip: 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: BRENT WOODS ED 03/24/2009