

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000096785

**FILED**  
**Sep 28, 2012**  
**Secretary of State**

**Entity Name:** NATIONAL INSTITUTE FOR GOVERNMENT PROCUREMENT AND PROJECT MANAGEMENT LLC.

**Current Principal Place of Business:**

4004 NORTH 30 STREET  
(UNIT D)  
TAMPA, FL 33610

**New Principal Place of Business:**

3603 WEST DALE AVE  
TAMPA, FL 33609

**Current Mailing Address:**

4004 NORTH 30 STREET  
(UNIT D)  
TAMPA, FL 33610

**New Mailing Address:**

3603 WEST DALE AVE  
TAMPA, FL 33609

**FEI Number:** 80-0493940

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FORD, REGINALD  
4004 NORTH 30 STREET  
(UNIT D)  
TAMPA, FL 33610 US

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

FORD, REGINALD  
3603 WEST DALE AVE  
TAMPA, FL 33609 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: REGINALD FORD

09/28/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FORD, REGINALD  
Address: 3603 WEST DALE AVE  
City-St-Zip: TAMPA, FL 33609

Title: MGR  
Name: JACKSON, BRIGID  
Address: 3729 GAZEBO POND LANE  
City-St-Zip: TAMPA, FL 33613

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: REGINALD FORD

MGR

09/28/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date