

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000741

FILED
Jan 16, 2009
Secretary of State

Entity Name: INDOOR AIR QUALITY ASSOCIATION, INC.

Current Principal Place of Business:

12339 CARROLL AVE
ROCKVILLE, MD 20852

New Principal Place of Business:

Current Mailing Address:

12339 CARROLL AVE
ROCKVILLE, MD 20852

New Mailing Address:

FEI Number: 59-3596161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAILEY, HOLL
8633 DAMASCUS DR.
PALM BEACH GARDENS, FL 33418 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: DP () Delete
Name: ASK, ANDREW
Address: 5215 DEL PRADO BOULEVARD
City-St-Zip: CAPE CORAL, FL 33904

Title: D () Delete
Name: FELLMAN, GLENN
Address: 12339 CARROLL AVENUE
City-St-Zip: ROCKVILLE, MD 20852

Title: D () Delete
Name: ROBERT, BAKER
Address: 608 CITICORP DRIVE #500
City-St-Zip: TAMPA, FL 33619

Title: DT () Delete
Name: WANE, BAKER
Address: 811 MONITOR STREET, SUITE 100
City-St-Zip: LA CROSSE, WI 54603

Title: D () Delete
Name: CARL, GRIMES
Address: 1811 SOUTH QUEBEC WAY, #99
City-St-Zip: DENVER, CO 80231

Title: D () Delete
Name: MARK, DELISLE
Address: 5050 S. SPRINKLE ROAD
City-St-Zip: PORTAGE, MI 49002

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: GLENN FELLMAN

DS

01/16/2009

Electronic Signature of Signing Officer or Director

Date