## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P00000097244

1. Entity Name

NATIONAL ASSOCIATION OF PROCUREMENT PROFESSIONALS, INC.

FILED
Feb 25, 2008 08:00 AN
Secretary of State

Principal Place of Business

1570 DOXEE TERR MARCO ISLAND, FL 34145 Mailing Address

1570 DOXEE TERR MARCO ISLAND, FL 34145



DO NOT WRITE IN THIS SPACE

02192008 No Chg-P CR2E034 (11/05)

4. FEI Number 37-1434936 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KREIDER, LARRY 1570 DOXEE TERR MARCO ISLAND, FL 34145

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE LARRY KREIDGR 2/19/08 Signature, typed or printed name of regristered agent and tille if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KREIDER, LARRY 1570 DOXEE TERR MARCO ISLAND, FL 34145				U00000836	:059 :02-009 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ELKO, DAVID M 8900 LANDIS AVE WEST SEA ISLE CITY, NJ 08243				U3/U4/U6-6UL	150.00 iso.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GRILLO, SAL 433 5TH STREET BROOKLYN, NY 11215			DO	NOT WRI	TE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KURYEA, BARBARA 15891 DÉLA SOL LANE NAPLES, FL 34110			IN	THIS SPA	CE
TITLE NAME STREET ADDRESS CITY-ST-ZIP.						•
TITLE NAME STREET ADDRESS CITY-ST-ZIP				1.2		and the second second
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an suffress, with all other like empowered.						