2002 UNIFORM BUSINESS REPORT (UBR)

May 28, 2002 8:00 am Secretary of State DOCUMENT # **P07026** THE NATIONAL OSTEOPOROSIS FOUNDATION, INC. 05-28-2002 91707 024 ****61.25 Principal Place of Business Mailing Address 1232 22ND STREET NW 1232 22ND STREET NW WASHINGTON DC 20037 WASHINGTON DC 20037 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 36-3350532 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$ 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 П Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 CD : (9/01)TITLE ☐ Delete TITLE Change Addition NAME ROGERS, PAUL G NAME STREET ADDRESS 5110 YUMA ST. N.W. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP WASHINGTON DC 20016 TITLE ☐ Delete TITLE Change ☐ Addition CHESTNUT, CHARLES H III, MD NAME STREET ADDRESS 218 40TH AVE., EAST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SEATTLE WA 98112 TITLE 🛫 🛬 👵 Delete 🗓 چې ------ Change JOHNSTON, C C NAME NAME STREET ADDRESS 5002 BUTTONWOOD CRESCENT STREET ADDRESS CITY-ST-ZIP Indianapolis in 46208 CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME **BONNER, FRANCIS J** NAME STREET ADDRESS 553 COUNTY LINE ROAD STREET ADDRESS CITY-ST-ZIP RADNOR PA 19087 CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change Addition NAME BRADLEY, WAYNE W NAME STREET ADDRESS 74 HIGHGATE COURSE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. CHARLES IL 60174 Acting Executive Director TITLE ED Delete TITLE Change Addition Judion A. Ceanford NAME RAYMOND, SANDRA C NAME Drive 1417 Avaman STREET ADDRESS 2555 PENN. AVE. N.W. #808 STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like propowered.

CITY-ST-ZIP

McLean, VA

WASHINGTON DC 20037

CITY-ST-ZIP

5/15/2002 (202)223-2226

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