## **2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07026

Entity Name: THE NATIONAL OSTEOPOROSIS FOUNDATION, INC.

FILED Feb 27, 2013 Secretary of State CC2828682106

## **Current Principal Place of Business:**

1150 17TH STREET NW SUITE 850 WASHINGTON, DC 20036

## **Current Mailing Address:**

1150 17TH STREET NW SUITE 850 WASHINGTON, DC 20036

FEI Number: 36-3350532 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

City-State-Zip:

Electronic Signature of Registered Agent

Officer/Director Detail:

Title C Title

Name MICA, DANIEL A Name RECKER, ROBERT RMD

Address 7306 BURTONWOOD DRIVE Address 601 N. 30TH STREET, SUITE 5766

City-State-Zip: ALEXANDRIA VA 22307 City-State-Zip: OMAHA NE 68131

Title T Title S

Name SCHARER, L. SCOTT Name MILLER, ANN C DR.

Address 29 COMMONWEALTH AVENUE; SUITE Address 91 SYDNEY STREET 201 #505

BOSTON MA 02116 City-State-Zip: CAMBRIDGE MA 02139

Title CEO

Name PORTER, AMY

Address 1150 17TH STREET, NW; SUITE 850

City-State-Zip: WASHINGTON DC 20036

I hereby 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 all other like empowered.

Date