

1.) CORPORATION NAME:

IPM INTERNATIONAL INC.

DUE DATE: **5/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MARA SPENCER
6119 UNION VILLAGE DR
CLIFTON, VA**

SCC ID NO: **F1669219**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1732 20TH ST NW

CITY/ST/ZIP: WASHINGTON, DC 20009

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	JAN KITTO BURKE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	3000 TUTTLE CREEK BLVD #550		
CITY/ST/ZIP/CO:	MANHATTAN, KS 66502		
NAME:	RICHARD LASSITER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	4070 GOV ALMOND ROAD		
CITY/ST/ZIP/CO:	LOCUST GROVE, KS 22508		
NAME:	CAROLYN CLARK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6598 CHARTWELL DRIVE		
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23464		
NAME:	MARYANNE WASSENBERG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	6682 COLONNADES		
CITY/ST/ZIP/CO:	WARRENTON, VA 20187		
NAME:	DORINDA FOX	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5 PRAIRIE LANE		
CITY/ST/ZIP/CO:	PLACITAS, NM 87043		
NAME:	MARY D JOHNSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1403 APPLE LANE APT 8		
CITY/ST/ZIP/CO:	LAWRENCE, KS 66049		

NAME:	DAWN M OVERSTREET	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	929 WINONA AVENUE SW		
CITY/ST/ZIP/CO:	ROANOKE, VA 24015		

NAME:	MARA L SPENCER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6119 UNION VILLAGE DR		
CITY/ST/ZIP/CO:	CLIFTON, VA 20124		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MARY D JOHNSON	MARY D JOHNSON, DIRECTOR	4/19/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.