

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 05, 2004
Secretary of State**

DOCUMENT# N08379

Entity Name: FLORIDA SOCIETY FOR MICROSCOPY, INC.

Current Principal Place of Business:

USF 4202 E. FOWLER AVE
DEPT BIOLOGY SCA 110
TAMPA, FL 33620 US

New Principal Place of Business:

Current Mailing Address:

USF 4202 E. FOWLER AVE
BIOLOGY SCA 110
TAMPA, FL 33620 US

New Mailing Address:

FEI Number: 59-2440350 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANFLEET, RICHARD R SDTD
UCF PHYSICS AMPAC 4000 CENTRAL FL BLVD
ROOM 381
ORLANDO, FL 32816 US

Name and Address of New Registered Agent:

LORAAMM, BETTY SDTD
USF 4202 E. FOWLER AVE
BIOLOGY SCA 110
TAMPA, FL 33620 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: BETTY LORAAMM 04/05/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

- Title: PD () Delete
- Name: DEMPERE, LUISA A PD
- Address: 107 MAEC , PO BOX 116400
- City-St-Zip: GAINESVILLE, FL 32611 US

- Title: SDTD () Delete
- Name: LORAAMM, BETTY SDTD
- Address: 4202 E. FOWLER AVE SCA 110
- City-St-Zip: TAMPA, FL 33620 US

- Title: VPD () Delete
- Name: PRENITZER, BRENDA I VPD
- Address: 12565 RESEARCH PKWY, SUITE 300
- City-St-Zip: ORLANDO, FL 32826 US

- Title: D () Delete
- Name: GIANNUZZI, LUCILLE D
- Address: 4000 CENTRAL FLORIDA BLVD
- City-St-Zip: ORLANDO, FL 32816 US

- Title: D () Delete
- Name: GRECO, ANTHONY D
- Address: 140 SEVENTH AVENUE S., MSL 119
- City-St-Zip: ST. PETERSBURG, FL 33701 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

- Title: () Change () Addition
- Name:
- 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 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 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: BETTY LORAAMM SDTD 04/05/2004
Electronic Signature of Signing Officer or Director Date