

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000005243

FILED
Mar 26, 2002 8:00 AM
Secretary of State

Entity Name: SECOND WIND - LUNG TRANSPLANT ASSOCIATION, INC.

Current Principal Place of Business:

300 S. DUNCAN AVE.
SUITE 227
CLEARWATER, FL 33755 US

New Principal Place of Business:

Current Mailing Address:

300 S. DUNCAN AVE.
SUITE 227
CLEARWATER, FL 33755 US

New Mailing Address:

FEI Number: 65-0644075 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEERING, EVELYN
300 S. DUNCAN AVE.
SUITE 227
CLEARWATER, FL 33755

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: BUNSEN, STEVE
Address: 43629 RD 741
City-St-Zip: SMITHFIELD, NE 68976

Title: DP () Delete
Name: ANDERSON, PAUL
Address: 1585 KINCAID RD.
City-St-Zip: MARIETTA, GA 30066

Title: DV () Delete
Name: WYATT, RICHARD
Address: 1917 BEECHWOOD
City-St-Zip: LITTLEROCK, AR 722072003

Title: DV () Delete
Name: FLYNN, KATHRYN
Address: 2509 OLD NL 10
City-St-Zip: HILLSBOROUGH, NC 27278

Title: DS () Delete
Name: SCHUM, JOANNE
Address: 1104 BAY RD
City-St-Zip: WEBSTER, NY 14680

Title: D () Delete
Name: OLSEN, SANDI
Address: 1167 TURNER STREET #202
City-St-Zip: CLEARWATER, FL 34616

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: BUNSEN, STEVE
Address: 43629 RD 741
City-St-Zip: SMITHFIELD, NE 68976

Title: D (X) Change () Addition
Name: ANDERSON, PAUL
Address: 1585 KINCAID RD.
City-St-Zip: MARIETTA, GA 30066

Title: DT (X) Change () Addition
Name: WYATT, RICHARD
Address: 1917 BEECHWOOD
City-St-Zip: LITTLEROCK, AR 722072003

Title: DP (X) Change () Addition
Name: FLYNN, KATHRYN
Address: 2509 OLD NL 10
City-St-Zip: HILLSBOROUGH, NC 27278

Title: DS (X) Change () Addition
Name: RETA, MELISSA
Address: 11317 LA MARIDA BLVD.. #47
City-St-Zip: WHITTIER, CA 90604

Title: D (X) Change () Addition
Name: WALSER, CARMEN
Address: 8009 POTTERS RD
City-St-Zip: MATTHEWS, NC 28104

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: DICK WYATT

_____ Electronic Signature of Signing Officer or Director

DT

03/26/2002

_____ Date