

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006353

FILED
Feb 12, 2009
Secretary of State

Entity Name: AMERICAN HERNIA SOCIETY, INC.

Current Principal Place of Business:

4582 SOUTH ULSTER STREET PKWY #201
DENVER, CO 80237

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4834
ENGLEWOOD, CO 80155

New Mailing Address:

FEI Number: 59-2301682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILBERT, ARTHUR MD
13637 DEERING BAY DR #282
CORAL GABLES, FL 33158 US

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: PRES () Delete
Name: VOELLER, GUY MD
Address: 50 HUMPHREYS CENTER #30
City-St-Zip: MEMPHIS, TN 38120

Title: D () Delete
Name: MURPHY, JOHN
Address: 44199 DEQUINDRE #412
City-St-Zip: TROY, MI 48085

Title: D () Delete
Name: GO, PETER S
Address: 867 WEST MAIN STREET
City-St-Zip: SOMERSET, PA 15501

Title: ED () Delete
Name: GODDARD, CAROL
Address: 4582 S. ULSTER STREET PARKWAY #201
City-St-Zip: DENVER, CO 80237

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ARREGUI, MAURICE MD
Address: 8402 HARCOURT ROAD #815
City-St-Zip: INDIANAPOLIS, IN 46260

Title: SEC (X) Change () Addition
Name: MURPHY, JOHN
Address: 44199 DEQUINDRE #412
City-St-Zip: TROY, MI 48085

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 exemption stated in Chapter 119, 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: CAROL GODDARD

ED

02/12/2009

Electronic Signature of Signing Officer or Director

Date