

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90074 047 ****61.25

DOCUMENT # P02995

1. Entity Name

AMERICAN MASSAGE THERAPY ASSOCIATION, INCORPORAT

Principal Place of Business

Mailing Address

820 DAVIS ST
 SUITE 100
 EVANSTON IL 60201-4444

820 DAVIS ST
 SUITE 100
 EVANSTON IL 60201-4400

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

62-0968813

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** Delete
 NAME **MILLER, MAUREEN**
 STREET ADDRESS **PO BOX 1339**
 CITY-ST-ZIP **BOULDER CO 80306**

TITLE **P, D** Change Addition
 NAME **Maureen Moon**
 STREET ADDRESS **P.O. Box 1339**
 CITY-ST-ZIP **Boulder, CO 80306-1339**

TITLE **ST** Delete
 NAME **SPERGER, MARLYS**
 STREET ADDRESS **820 DAVIS**
 CITY-ST-ZIP **EVANSTON IL**

TITLE **PP, D** Change Addition
 NAME **Adela Basayne**
 STREET ADDRESS **2201 NE 21st Ave.**
 CITY-ST-ZIP **Portland, OR 97212**

TITLE **D** Delete
 NAME **DONOHUE, PATRICIA**
 STREET ADDRESS **152 WELLWOOD AVENUE, #5**
 CITY-ST-ZIP **LINDENHURST NY 11757**

TITLE **D** Change Addition
 NAME **Brenda Griffith**
 STREET ADDRESS **10231 Maplested Lane**
 CITY-ST-ZIP **Richmond, VA 23235**

TITLE **PP** Delete
 NAME **LEBRUN, E. HOUSTON**
 STREET ADDRESS **310 12TH AVE. EAST, #306**
 CITY-ST-ZIP **SEATTLE WA 98102**

TITLE ***** Change Addition
 NAME **See Attached Sheet for**
 STREET ADDRESS **complete list of Directors**
 CITY-ST-ZIP **& Officers *****

TITLE **D** Delete
 NAME **BALLETTO, JOHN**
 STREET ADDRESS **82 PITMAN STREET**
 CITY-ST-ZIP **PROVIDENCE RI 02906**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **BORRELLI, DENISE**
 STREET ADDRESS **52 FERNVIEW #10**
 CITY-ST-ZIP **NORTH ANDOVER RI 01845**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WYALOUIS REQUIRED Sec./Treas. 3-9-00 847-864-0123
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)

02995

Attachment
10042354

**NATIONAL BOARD OF DIRECTORS
as of January 5, 2000**

PRESIDENT

Maureen A. Moon *
PO Box 1339
Boulder, CO 80306-1339
Ph: 303.443.8213
Fax: 303.443.3869
Mmille2706@aol.com

PRESIDENT-ELECT

Steve Olson *
PO Box 350
Fargo, ND 58107-0350
Ph: 701.298.6869
Fax: 701.293.9551
stevefargo@msn.com

**IMMEDIATE PAST
PRESIDENT**

Adela T. Basayne *
2201 NE 21st Avenue
Portland, OR 97212
Ph: 503.288.0099
Fax: 503.288.7974
adelabasayne@msn.com

VICE PRESIDENT

Denise Borrelli *
52 Fernview Avenue
Unit 10
North Andover, MA 01845
Ph: 781.393.9370
Fax: 978.794.2114
drdee@tiac.net

VICE PRESIDENT

Patricia M. Donohue *
152 N. Wellwood Avenue
Suite #5
Lindenhurst, NY 11757
Ph: 516.884.7805
Fax: 516.884.0165
pdjif@aol.com

VICE PRESIDENT

Brenda L. Griffith*
10231 Maplested Lane
Richmond, VA 23235
Ph: 804.272.1015
Fax: 804.320.0724
blg@bonair.net

SECRETARY/ TREASURER

Marlys Sperger
AMTA
820 Davis Street, Suite 100
Evanston, IL 60201-4444

*(any express mail: no signature
req'd)*

MEMBERS-AT-LARGE

Debra Brooks
Neuromuscular Therapy Center
PO Box 277
Walford, IA 52351-0277
Ph: 319.846.2668
Fax: 319.846.2443
Debra_Brooks@mail.ccs.k12.ia.us

Jeanne Girard
654 Van Loo Road
Canon City, CO 81212
Ph: 719.269.1912
Fax: 719.269.1912 *(phone first)*

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1101 Cardenas, NE
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*(press *51 after beep)*
robynlmt@aol.com

Laurel J. Freeman
2622 NW 43rd Street
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Gainesville, FL 32606
Ph: 352.371.9689
Fax: 352.378.7558

Bonnie Niebauer
499 City Park Avenue
Columbus, OH 43215
Ph: 614.523.8453
Fax: 614.224.5340
gaslight@infinet.com

*Executive Committee
Members