2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2002
Secretary of State

DOCUMENT# N08379

Entity Name: FLORIDA SOCIETY FOR MICROSCOPY, INC.

Current Principal Place of Business:

USF ANATOMY DEPT. MDC 6
12901 N. BRUCE B DOWNS BLVD
TAMPA, FL 33612

New Principal Place of Business:

UCF AMPAC
BOX 162455
ORLANDO, FL 32816 US

Current Mailing Address:

USF ANATOMY DEPT. MDC 6
12901 N. BRUCE B DOWNS BLVD
TAMPA, FL 33612

New Mailing Address:

AMPAC UCF 4000 CENTRAL FLORIDA BLVD
RM 381 BOX 162455
ORLANDO, FL 32816 US

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

Name and Address of Current Registered Agent:

MOORE, JO ANN
USF ANATOMY DEPT. MDC 6
12901 N. BRUCE B DOWNS BLVD
TAMPA, FL 33612

Name and Address of New Registered Agent:

VANFLEET, RICHARD R SDTD
UCF PHYSICS AMPAC 4000 CENTRAL FL BLVD
ROOM 381
ORLANDO, FL 32816 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: RICHARD R VANFLEET 07/23/2002
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	PRENITZER, BRENDA I	
Address:	9333 S. JOHN YOUNG PARKWAY	
City-St-Zip:	ORLANDO, FL 32819 US	
Title:	VD	(X) Delete
Name:	MOORE, JO ANN	
Address:	12901 N. BRUCE B DOWNS BLVD, MDC 6	
City-St-Zip:	TAMPA, FL 33612	
Title:	SDTD	( ) Delete
Name:	IRWIN, RICHARD	
Address:	9333 S. JOHN YOUNG PARKWAY	
City-St-Zip:	ORLANDO, FL 32819	
Title:	D	( ) Delete
Name:	LORAAMM, BETTY	
Address:	4202 E. FOWLER AV SCA110	
City-St-Zip:	TAMPA, FL 33620 US	
Title:	D	( ) Delete
Name:	GIANNUZZI, LUCILLE	
Address:	12443 RESEARCH PARKWAY SUITE 305	
City-St-Zip:	ORLANDO, FL 32826 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SDTD	(X) Change ( ) Addition
Name:	VANFLEET, RICHARD R SDTD	
Address:	4000 CENTRAL FLORIDA BLVD	
City-St-Zip:	ORLANDO, FL 32816 US	
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: RICHARD R VANFLEET SDTD 07/23/2002
Electronic Signature of Signing Officer or Director Date