## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 704348** 

Entity Name: ASSOCIATION FOR THE ADVANCEMENT OF AUTOMOTIVE

MEDICINE, INC.

**Current Principal Place of Business:** 

191 OLD SUTTON ROAD BARRINGTON, IL 60010

**Current Mailing Address:** 

191 OLD SUTTON ROAD BARRINGTON, IL 60010

FEI Number: 91-6072386 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHULMAN, CARL I DR. 1800 NW 10TH AVE D55 ROOM T215 MIAMI, FL 33136 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: CARL I. SCHULMAN, MD 03/18/2014

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title O Title O

Name ARBOGAST, KRISTY B. PHD Name PINTAR, FRANK PHD

Address 160 FOX ROAD Address 5000 W NATIONAL AVE, VAMC 151

City-State-Zip: MEDIA PA 19063 City-State-Zip: MILWAUKEE WI 53295

Title O.

Name VACA, FEDERICO E. DR.

Address YALE UNIVERSITY SCHOOL OF

**MEDICINE** 

464 CONGRESS AVENUE, SUITE 260

City-State-Zip: NEW HAVEN CT 06519

I hereby 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 all other like empowered.

SIGNATURE: KRISTY ARBOGAST

DIRECTOR

03/18/2014

FILED Mar 18, 2014

**Secretary of State** 

CC5875144567

Electronic Signature of Signing Officer/Director Detail

Date