

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000011366

FILED
Apr 29, 2016
Secretary of State
CC1814911889

Entity Name: THE AMERICAS HEPATO-PANCREATO-BILIARY FOUNDATION, INC.

Current Principal Place of Business:

620 INDIAN WAY
BARRINGTON, IL 60010

Current Mailing Address:

620 INDIAN WAY
BARRINGTON, IL 60010 US

FEI Number: 27-4355142

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SCHIRMER, BRUCE DMD
Address P.O. BOX 800709
City-State-Zip: CHARLOTTESVILLE VA 22908-0709

Title TREASURER
Name ADAMS, REID
Address BOX 800709
City-State-Zip: CHARLOTTESVILLE VA 22908-0709

Title DIRECTOR
Name GREIG, PAUL
Address 585 UNIVERSITY AVE.
City-State-Zip: TORONTO ONTARIO M5G 2N2

Title DIRECTOR
Name IMVENTARZA, OSCAR
Address COMBATE DE LOS POZOS 1881
 VIRREY LORETO 1721
City-State-Zip: BUENOS AIRES 1426

Title DIRECTOR
Name ORLOFF, SUSAN
Address 3181 SW SAM JACKSON PARK RD
City-State-Zip: PORTLAND OR 97239-3098

Title SECRETARY
Name PITT, HENRY
Address 535 BARNHILL FRIVE, RT 130 D
City-State-Zip: INDIANAPOLIS IN 46202

Title DIRECTOR
Name VAUTHEY, JEAN-NICOLAS
Address UNIT 1484
City-State-Zip: HOUSTON TX 77030

Title EXECUTIVE DIRECTOR
Name MALIA, MARJIE
Address 620 INDIAN WAY
City-State-Zip: BARRINGTON IL 60010

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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: MARJIE MALIA

EXECUTIVE DIRECTOR

04/29/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name PINSON, C. WRIGHT
Address 1161 21ST AVE SOUTH
D3300 MCN
City-State-Zip: NASHVILLE TN 37232

Title DIRECTOR
Name COIMBRA, FELIPE
Address RUO JOSE GETULIO, 579, CONJ. 42
City-State-Zip: SAO PAULO 01509-001