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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 04 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

SIGNATURE:

727431

(9)

AMERICAN ASSOCIATION OF PHONETIC SCIENCES, INC.

Principal Place	o of Business	Mailing Ac	Idrace					
,		"						
AAPS 63 DAUER University of		AAPS P.O. E UNIVERSITY						
GAINESVILLE FL			E FL 32804-2095					
US		US			_	3. Date Incorporated or Qualified		
	lace of Business	2a. Mailing	Address			4. FEI Number NOT APPLICABLE Applied For Not Applicable		
21		26				Tree / pp//date/		
Suite, Apt.	#, etc	—	Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Regulred		
City & State	ο	27 City &	State					
23	G	28	Olate			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip		Country	·	8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29	3	30		Florida Statutes Yes No		
	9. Name and Address of Curre	nt Registered A	gent			10. Name and Address of New Registered Agent		
				81	Nam	ine		
BROWN, WILLIAM S JR				62	82 Street Address (P.O. Box Number is Not Acceptable)			
	DAUER HALL		or other vi			bot that bot (t. to, bot trained to the thought all to		
UNIVERIS	STY OF FLORIDA			83				
GAINESV	VLLE FL 32611			B4	City	y 85 Zip Code		
						FL ``		
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508	, Florida Statutes	s, the above	e-name	med corporation submits this statement for the purpose of changing its registered		
agent. La	m familiar with, and accept the oblig	gations of Section	n 617.0503, Flor	ida Statute	y 1110 CC S.	corporation's board of directors. I hereby accept the appointment as registered		
SIGNATURE								
	Signature, lyped or printed name of registered at		la. (NOTE:		nt signatu	nature required when reinstating) DATE		
12.	PD OFFICERS AF	ND DIRECTORS	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition		
TITLE	l . -			4		Colonide T Working		
NAME	ORLIKOFF, ROBERT SLOAN-KETTERING			1.2 NAME				
STREET ADDRESS	NEW YORK NY			1.3 STREET		1230		
CITY-ST-ZIP TITLE			DELETE	1.4 C(TY+S 2.1 T(TLE	51 - ZIP	☐ Change ☐ Additio		
NAME	VD/+o/+ HOPT, JENNY			2.2 NAME				
STREET ADDRESS	UNIV OF ARIZONA			2.3 STREET	ADDRESS	Pes		
CITY-ST-ZIP	TUCSON AR			2. 4 CITY -				
TITLE	D		DELETE	3.1 TITLE	01 211	☐ Change ☐ Additio		
NAME	BLESS, DIANE			3.2 NAME				
STREET ADDRESS	UNIV OF WISCONSIN			3.3 STREET	ADDRESS	iess .		
CITY - ST - ZIP	MADISON WI			3.4. CITY-	ST-ZIP			
TITLE	D		DELETE	4.1 TITLE		Change Additio		
NAME	WEISS, RUDOLF			4. 2 NAME				
STREET ADORESS		IGTON		4.3 STREET	ADDRESS	ress		
CITY-ST-ZIP	BELLINGHAM WA			4.4 CITY - 5	ST-ZIP			
TITLE	SD		DELETE	5.1 TITLE		☐ Change ☐ Additio		
NAME	Brown, W S, Jr			5.2 NAME				
STREET ADDRESS	UNIVERSITY OF FLA		,	5.3 STREE	T ADDRES	IESS		
CITY-ST-ZIP	GAINESVILLE, FL 00000			5.4 CITY-5	ST-ZIP			
TITLE	D		DELETE	6.1 TITLE		D Change Addition		
NAME	OHDE, RALPH			6.2 NAME		THOMAS MURRY OF PITTSBURGH		
STREET ADDRESS	VANDERBILT UNIVERSITY			6.3 STREET	ADDRESS	ESS UNIVERSITY OF FITTE DURGH		
CITY-ST-ZIP	NASHVILLE TN			6.4 CITY - 5	ST-ZIP	PLTTS BURCH PA ion stated in Section 119.07(3)(i), Florida Statutes. I further certify that the and that my signature shall have the same legal effect as if made under oath; the		
14. I do herel information	by certify that the information suppli on indicated on this annual report or	ed with this filing supplemental ar	does not qualify nual report is tru	ror the exe ue and acc	emption urate a	ion stated in Section 119.07(3)(i), Florida Statutes. I further certify that the I and that my signature shall have the same legal effect as if made under oath; th		
l am an o	officer or director of the corporation in Block 12 or Block 13 if changed,	or the receiver or	trustee empowe	erea to exec	cute thi	this report as jequired by Unapher 617, Florida Stalutes; and that my name		
appears	III DIOCK IE OF DIOCK TO IT OF BEINGOU,	or on an account						