

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000617

FILED  
Jan 04, 2011  
Secretary of State

**Entity Name:** AMERICAN ASSOCIATION OF ZOO VETERINARIANS CO.

**Current Principal Place of Business:**

581705 WHITE OAK ROAD  
YULEE, FL 32097

**New Principal Place of Business:**

**Current Mailing Address:**

581705 WHITE OAK ROAD  
YULEE, FL 32097

**New Mailing Address:**

**FEI Number:** 59-6146888

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HILSENROTH, ROBERT DR.  
581705 WHITE OAK ROAD  
YULEE, FL 32097 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PE  
Name: SUEDMEYER, WILLIAM DR.  
Address: 6800 ZOO DRIVE  
City-St-Zip: KANSAS CITY, MO 64132

Title: VP  
Name: CALLE, PAUL DR.  
Address: 2300 SOUTHERN BLVD.  
City-St-Zip: BRONX, NY 10460

Title: S  
Name: ARMSTRONG, DOUGLAS L DR.  
Address: 3701 S. 10TH STREET  
City-St-Zip: OMAHA, NE 68107

Title: T  
Name: CLYDE, VICKI DR.  
Address: 10001 BLUEMOUND ROAD  
City-St-Zip: MILWAUKEE, WI 53226

Title: P  
Name: BACUES, KAY DR.  
Address: 5701 E. 36 STREET  
City-St-Zip: TULSA, OK 74115

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: ROBERT HILSENROTH, DVM

ED

01/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date