

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003716

FILED
Apr 27, 2009
Secretary of State

Entity Name: ASSOCIATION OF AMERICAN MEDICAL COLLEGES INC.

Current Principal Place of Business:

2450 N. STREET NW
WASHINGTON, DC 20037

New Principal Place of Business:

Current Mailing Address:

2450 N. STREET NW
WASHINGTON, DC 20037

New Mailing Address:

FEI Number: 36-2169124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DP () Delete
Name: KIRCH, DARRELL G MD
Address: 2450 N ST NW, ROOM 563
City-St-Zip: WASHINGTON, DC 20037

Title: PCEO () Delete
Name: SUSSMAN, ELLIOT
Address: LEHIGH VALLEY HOSPITAL CEDAR CREST & I-78
City-St-Zip: ALLENTOWN, PA 18105

Title: EVP () Delete
Name: ASCHENBRENER, CAROL A MD
Address: 2450 N ST NW
City-St-Zip: WASHINGTON, DC 20037

Title: V () Delete
Name: REECE, ALBERT E
Address: 655 WEST BALTIMORE ST, ROOM 14-029
City-St-Zip: BALTIMORE, MD 21201

Title: AT () Delete
Name: FRIEDMAN, BARARA S
Address: 2450 N. STREET NW
City-St-Zip: WASHINGTON, DC 20037

Title: V () Delete
Name: WILSON, H. DAVID MD
Address: 501 N. COLUMBIA ROAD, STOP 9037
City-St-Zip: GRAND FORKS, ND 58202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KIRCH, DARRELL G MD
Address: 2450 N ST NW, ROOM 563
City-St-Zip: WASHINGTON, DC 20037

Title: PD (X) Change () Addition
Name: SUSSMAN, ELLIOT
Address: LEHIGH VALLEY HOSPITAL CEDAR CREST & I-78
City-St-Zip: ALLENTOWN, PA 18105

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: REECE, ALBERT E
Address: 655 WEST BALTIMORE ST, ROOM 14-029
City-St-Zip: BALTIMORE, MD 21201

Title: ST (X) Change () Addition
Name: FRIEDMAN, BARARA S
Address: 2450 N STREET NW
City-St-Zip: WASHINGTON, DC 20037

Title: EVP (X) Change () Addition
Name: KNAPP, RICHARD M PHD
Address: 2450 N STREET NW
City-St-Zip: WASHINGTON, DC 20037

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BARBARA S. FRIEDMAN

ST

04/27/2009

Electronic Signature of Signing Officer or Director

Date