2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003723

FILED Apr 15, 2009 Secretary of State

Entity Name: AMERICAN ASSOCIATION OF AVIAN PATHOLOGISTS, INC.

Current Principal Place of Business: New Principal Place of Business:

12627 SAN JOSE BLVD, SUITE 202 12627 SAN JOSE BLVD. JACKSONVILLE, FL 322238636

SUITE 202

JACKSONVILLE, FL 322238636 US

Current Mailing Address: New Mailing Address:

12627 SAN JOSE BLVD, 12627 SAN JOSE BLVD, SUITE 202

SUITE 202 JACKSONVILLE, FL 322238636

JACKSONVILLE, FL 322238636 US

FEI Number: 04-2349061 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BEVANS-KERR, JANECE BEVANS-KERR, JANECE C 12627 SAN JOSÉ BLVD, SUITE 202 12627 SAN JOSE BLVD,

JACKSONVILLE, FL 322238636 US SUITE 202

JACKSONVILLE, FL 322238636 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: JANECE C. BEVANS-KERR 04/15/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

CST (X) Change () Addition () Delete

HOFACRE, CHARLES HOFACRE, CHARLES Name: Name: 953 COLLEGE STATION ROAD Address: 953 COLLEGE STATION ROAD Address:

City-St-Zip: ATHENS, GA 306024875 City-St-Zip: ATHENS, GA 306024875 US

(X) Change () Addition Title: VCP () Delete Title: STEWART-BROWN, BRUCE Name: STEWART-BROWN, BRUCE Name: Address: PERDUE FARMS, PO BOX 1537 Address: PERDUE FARMS, PO BOX 1537 City-St-Zip: SALISBURY, MD 21802 City-St-Zip: SALISBURY, MD 21802 US

Title: DP () Delete Title: (X) Change () Addition

SHARMA, JAGDEV Name: SHARMA, JAGDEV Name: 1971 COMMONWEALTH AVE Address: 1971 COMMONWEALTH AVE Address: City-St-Zip: ST PAUL, MN 55108 City-St-Zip: ST PAUL, MN 55108 US

Title: () Delete Title: DR (X) Change () Addition

HOERR, FRED PAST P Name: Name: HOERR, FRED PAST P PO BOX 2209 PO BOX 2209 Address: Address:

City-St-Zip: AUBURN, AL 38831 City-St-Zip: AUBURN, AL 38831 US

Title: () Delete Title: (X) Change () Addition CERVANTES, HECTOR SOUTH CERVANTES, HECTOR SOUTH Name: Name: 1031 WESTCHESTER CT 1031 WESTCHESTER CT Address: Address: City-St-Zip: WATKINSVILLE, GA 30677 City-St-Zip: WATKINSVILLE, GA 30677 US

Title: () Delete Title: (X) Change () Addition DUNN. PATRICIA NORTH DUNN, PATRICIA NORTH Name: Name:

Address: PENN STATE UNIVERSITY Address: PENN STATE UNIVERSITY UNIVERSITY PARK, PA 16802 UNIVERSITY PARK, PA 16802 US City-St-Zip: City-St-Zip:

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: ROBERT BEVANS-KERR MR. 04/15/2009

Electronic Signature of Signing Officer or Director

Date