

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003723

FILED  
Jun 16, 2010  
Secretary of State

**Entity Name:** AMERICAN ASSOCIATION OF AVIAN PATHOLOGISTS, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 04-2349061

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BEVANS-KERR, JANECE C  
12627 SAN JOSE BLVD,  
SUITE 202  
JACKSONVILLE, FL 322238636 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:** DR  
**Name:** HOFACRE, CHARLES SEC/TRE  
**Address:** 953 COLLEGE STATION ROAD  
**City-St-Zip:** ATHENS, GA 306024875 US

**Title:** DR  
**Name:** STEWART-BROWN, BRUCE PAST PR  
**Address:** PERDUE FARMS, PO BOX 1537  
**City-St-Zip:** SALISBURY, MD 21802 US

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

**Title:** DR  
**Name:** STEWART, RICHIE PRES EL  
**Address:** 30325 CANARY COURT  
**City-St-Zip:** ABBOTSFORD, BC V4X 2N4 CA

**Title:** DR  
**Name:** CERVANTES, HECTOR SOUTH  
**Address:** 1031 WESTCHESTER CT  
**City-St-Zip:** WATKINSVILLE, GA 30677 US

**Title:** DR  
**Name:** DAN, BAUTISTA NORTH  
**Address:** 16483 COUNTY SEAT HWY  
**City-St-Zip:** GEORGETOWN, DE 19947 US

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:** BOB BEVANS-KERR

MR.

06/16/2010

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

\_\_\_\_\_  
Date