

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003723

FILED  
Apr 13, 2012  
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 ( )**

**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:** S/T  
**Name:** HOFACRE, CHARLES SEC/TRE  
**Address:** 953 COLLEGE STATION ROAD  
**City-St-Zip:** ATHENS, GA 306024875 US

**Title:** PRES  
**Name:** DUNN, PATRICIA  
**Address:** ORCHARD RD  
**City-St-Zip:** UNIVERSITY PARK, PA 16802 US

**Title:** PE  
**Name:** BLAND, MARK PAST PR  
**Address:** 3562 JOMAR DRIVE  
**City-St-Zip:** NAPA, CA 94558 US

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

**Title:** D  
**Name:** VAN SAMBEEK, FRANCENE  
**Address:** 266 COUNTY ROAD 699  
**City-St-Zip:** CULLMAN, AL 35055 US

**Title:** D  
**Name:** DAN, BAUTISTA  
**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:** ROBERT A. BEVANS-KERR

ED

04/13/2012

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

\_\_\_\_\_  
Date