

FR9000005679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

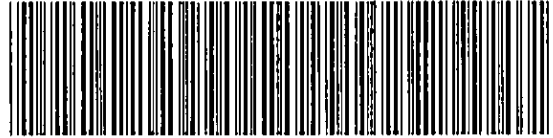
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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Office Use Only



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2019 DEC 19 11:09:07

T GLASS
DEC 26 2019



RESUBMIT

Please give original
submission date as file date.

FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 20, 2019

CSC

SUBJECT: THE AMERICAN OCCUPATIONAL THERAPY ASSOCIATION, INC.
Ref. Number: W19000110275

REC'D DEC 23 9:12:27

We have received your document for THE AMERICAN OCCUPATIONAL THERAPY ASSOCIATION, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tacarri K Glass
Regulatory Specialist II

Letter Number: 619A00025917

2019 DEC 19 PM 9:07

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 069570 7404493

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : November 27, 2019

ORDER TIME : 10:34 AM

ORDER NO. : 069570-020

CUSTOMER NO: 7404493

FOREIGN FILINGS

NAME: THE AMERICAN OCCUPATIONAL
THERAPY ASSOCIATION, INC.

XXXX QUALIFICATION (TYPE: NP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62980

EXAMINER: _____

2019 DEC 13 11:07

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*

1. The American Occupational Therapy Association, Inc.
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. District Of Columbia 3. 13-1526422
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/19/1917 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 4720 Montgomery Lane, Bethesda, MD 20814
(Principal office address)

(Current mailing address, if different)
8. _____
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip Code)
10. **Registered agent's acceptance:**
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company
By: Kadesh R. P.
(Registered agent's signature)
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

2017.10.19 1:09:01

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: See Attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See Attached

Address: _____

Vice President: _____

Address: _____

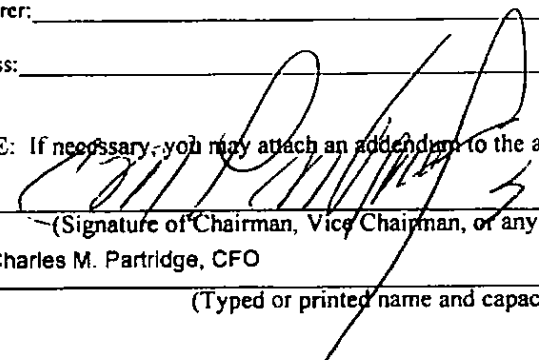
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Charles M. Partridge, CFO
(Typed or printed name and capacity of person signing application)

2019 Dec 19 11:19:07

AOTA Board of Directors

Wendy Hildenbrand, President
1214 Quail Walk Drive
Blue Springs, MO 64014

Debra Young, Vice President
107 Syracuse Drive
Newark, DE 19713

Melissa Tilton, Secretary
28 Elaine Avenue
Saugus, MA 01906

Karen Sames, Treasurer
1363 St. Andrew Boulevard
Eagan, MN 55123

Paul Arthur, Director
20223 NW 175th Avenue
High Springs, FL 32643

Donna Costa, Director
2079 Oliver Springs Street
Henderson, NV 89052

Lisa Mahaffey, Director
1611 Sierra Highlands Drive
Plainfield, IL 60586

David Merlo, Director
5854 Main Street, #404
Williamsville, NY 14221

Sherri Montgomery, Director
8 Clermont Court
Palm Coast, FL 32147

Alyson Stover, Director
28 Joseph Road
West Middlesex, PA 16159

Business Address

4720 Montgomery Lane
Bethesda, MD 20814

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2019 DEC 19 PM 9:07

Debbie Hines, Speaker RA Assembly
3982 East Herrera Drive
Phoenix, AZ 85050

4720 Montgomery Lane
Bethesda, MD 20814

AOTA Chief Officers

Sherry Keramidas, Executive Director
11550 Old Georgetown Road
Apt 432
North Bethesda, MD 20852

4720 Montgomery Lane
Bethesda, MD 20814

Matthew Clark, Chief Officer Innovation & Engagement
16531 Batchellors Forest Road
Olney, MD 20832

4720 Montgomery Lane
Bethesda, MD 20814

Neil Harvison, Chief Officer Knowledge
56 Ridge Road
New Milford, CT 06776

4720 Montgomery Lane
Bethesda, MD 20814

Chuck Partridge, Chief Officer Finance & Operations
4267 Embassy Park Drive
Washington, DC 20016

4720 Montgomery Lane
Bethesda, MD 20814

2019 Dec 19 PM 9:07

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
CORPORATIONS DIVISION



C E R T I F I C A T E

THIS IS TO CERTIFY that all applicable provisions of the District of Columbia Business Organizations Code (Title 29) have been complied with and accordingly, this ***CERTIFICATE OF GOOD STANDING*** is hereby issued to

AMERICAN OCCUPATIONAL THERAPY ASSOCIATION, INC., THE

WE FURTHER CERTIFY that the domestic filing entity is formed under the law of the District on 10/19/1917; that all fees, and penalties owed to the District for entity filings collected through the Mayor have been paid and Payment is reflected in the records of the Mayor; The entity's most recent biennial report required by § 29-102.11 has been delivered for filing to the Mayor; and the entity has not been dissolved. This office does not have any information about the entity's business practices and financial standing and this certificate shall not be construed as the entity's endorsement.

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed as of 11/27/2019 2:11 PM

Business and Professional Licensing Administration



Patricia E. Grays

PATRICIA E. GRAYS
Superintendent of Corporations
Corporations Division

Muriel Bowser
Mayor

Tracking #: TtrX7Tut