

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00647

FILED  
Apr 20, 2007  
Secretary of State

**Entity Name:** AMERICAN ELASMOBRANCH SOCIETY, A NON-PROFIT CORPORATION

**Current Principal Place of Business:**

JULIE A NEER, NMFS  
3500 DELWOOD BEACH ROAD  
PANAMA CITY, FL 32408 US

**New Principal Place of Business:**

**Current Mailing Address:**

JULIE A NEER, NMFS  
3500 DELWOOD BEACH ROAD  
PANAMA CITY, FL 32408 US

**New Mailing Address:**

**FEI Number:** 59-2517361

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GRUBER, SAMUEL H.  
4600 RICKENBACKER CAUSEWAY  
MIAMI, FL 33149 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: T ( ) Delete  
Name: NEER, JULIE A  
Address: 3500 DELWOOD BEACH ROAD  
City-St-Zip: PANAMA CITY, FL 32408 US

Title: S ( ) Delete  
Name: MCCANDLESS, CAMILLA  
Address: 28 TARZWELL DRIVE  
City-St-Zip: NARRAGANSETT, RI 02882 US

Title: D ( ) Delete  
Name: LUER, CARL  
Address: MOTE MARINE LAB  
City-St-Zip: SARASOTA, FL 34236

Title: E ( ) Delete  
Name: MORRISSEY, JOHN  
Address: 114 HOFSTRA UNIVERSITY  
City-St-Zip: HEMPSTEAD, NY 11549 US

Title: P ( ) Delete  
Name: CARRIER, JEFF  
Address: BIOLOGY - ALBION COLLEGE  
City-St-Zip: ALBION, MI 49224 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JULIE A NEER

T

04/20/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date