

FILED
Jun 04, 2007 8:00 am
Secretary of State

04-26-2007 90236 023 ****61.25

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N02000008338 1. Entity Name AMERICAN HERNIA SOCIETY EDUCATIONAL FOUNDATION, INC.					
Principal Place of Business 1811 WYCLIFF DR ORLANDO, FL 32803			Mailing Address 1811 WYCLIFF DR ORLANDO, FL 32803		
2. Principal Place of Business - No P.O. Box # 4582 S. Ulster St #201		3. Mailing Address PO Box 4834			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Denver, CO		City & State Englewood, CO		4. FEI Number 45-0498372	
Zip 80237		Country USA		Applied For ☐ Not Applicable	
Zip 80155		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILKES, SHELBY M 1811 WYCLIFF DR ORLANDO, FL 32803			7. Name and Address of New Registered Agent Name Arthur Gilbert, MD Street Address (P.O. Box Number is Not Acceptable) 13637 Deering Bay Drive #282 City Coral Gables FL Zip Code 33158		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Arthur Gilbert, MD</u> 4-23-07 Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP LEBLANC, KARL A M.D. ☐ Delete 777 HENNESSEY BLVD BATON ROUGE, LA 70808				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST GILBERT, ARTHUR I M.D. ☐ Delete 6250 SUNSET DR 2 FLR MIAMI, FL 33143				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ☒ Delete WILKES, SHELBY M 1811 WYCLIFF DR ORLANDO, FL 32803				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ☐ Delete Carol Goddard 4582 S. Ulster St #201 Denver, CO 80237				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Carol A. Goddard</u> 4-23-07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #					