

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02180

FILED
Jan 20, 2006
Secretary of State

Entity Name: ASSOCIATION OF INDEPENDENT BLOOD CENTERS, INC.

Current Principal Place of Business:

10130 NORTH LAKE BLVD.
214-215
WEST PALM BEACH, FL 33412 US

New Principal Place of Business:

1300 36TH STREET
VERO BEACH, FL 32960 US

Current Mailing Address:

10130 NORTH LAKE BLVD.
214-215
WEST PALM BEACH, FL 33412 US

New Mailing Address:

1300 36TH STREET
VERO BEACH, FL 32960 US

FEI Number: 59-2445150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLYNN, JOHN H
10130 NORTH LAKE BLVD
#214-215
WEST PALM BEACH, FL 33412 US

Name and Address of New Registered Agent:

JOHNSTON, PATRICIA M
1300 36TH STREET
VERO BEACH, FL 32960 US

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: PATRICIA M. JOHNSTON

01/20/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: NOLTE, MICHELE
Address: 1300 36TH STREET
City-St-Zip: VERO BEACH, FL 32960

Title: CD () Delete
Name: JOHNSTON, PAT
Address: 1300 36TH ST
City-St-Zip: VERO BEACH, FL 32960

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CD (X) Change () Addition
Name: JOHNSTON, PATRICIA M
Address: 1300 36TH ST
City-St-Zip: VERO BEACH, FL 32960

Title: VP () Change (X) Addition
Name: ZEUCH, WARREN
Address: 1300 36TH STREET
City-St-Zip: VERO BEACH, FL 32960

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: PATRICIA M. JOHNSTON

CEO

01/20/2006

Electronic Signature of Signing Officer or Director

Date