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: New Principal Place of Business:

10130 NORTH LAKE BLVD. 1300 36TH STREET

214-215 VERO BEACH, FL 32960

WEST PALM BEACH, FL 33412 US

Current Mailing Address: New Mailing Address:

10130 NORTH LAKE BLVD. 1300 36TH STREET

214-215 VERO BEACH, FL 32960 US

WEST PALM BEACH, FL 33412 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: Name and Address of New Registered Agent:

FLYNN, JOHN H

10130 NORTH LAKE BLVD

#214-215

JOHNSTON, PATRICIA M

1300 36TH STREET

VERO BEACH, FL 32960 US

#214-215 VERO BEACH, FL 32960 UWEST PALM BEACH, FL 33412 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Fitle: SD () Delete Title: () Change() Addition

 Name:
 NOLTE, MICHELE
 Name:

 Address:
 1300 36TH STREET
 Address:

 City-St-Zip:
 VERO BEACH, FL 32960
 City-St-Zip:

Title: CD () Delete Title: CD (X) Change () Addition

Name: JOHNSTON, PAT Name: JOHNSTON, PATRICIA M

Address: 1300 36TH ST Address: 1300 36TH ST

City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: VERO BEACH, FL 32960

Title: () Delete Title: VP () Change (X) Addition

 Name:
 Name:
 ZEUCH, WARREN

 Address:
 Address:
 1300 36TH STREET

 City-St-Zip:
 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