FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -7 PM 4:31

DOCUMENT # N04224 (4)

1. Corporation Name
THE ARTHRITIS RESEARCH INSTITUTE OF AMERICA, INC

Principal Place of Business	Mailing Address
% BETTY J HALL 300 S DUNCAN AVE #240 CLEARWATER FL 34615	% BETTY J HALL 300 S DUNCAN AVE #240 CLEARWATER FL 34615

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/17/1984
3a. Date of Last Report: 02/09/1994
4. FEI Number: 59-2438325 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

HALL, BETTY JEAN RN
300 S. DUNCAN AVE., STE. 240
CLEARWATER FL 34615

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Betty Jean Hall, R.N. Betty Jean Hall, RN 1/27/95
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered agent signature required when reinstating. DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	BARRETT, JOHN P. JR.	1.2 NAME	
STREET ADDRESS	1911 COVE LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL	1.4 CITY-ST-ZIP	
TITLE	CD	2.1 TITLE	☐ Change ☐ Addition
NAME	BROWN, PETER R.	2.2 NAME	
STREET ADDRESS	1475 S BELCHER RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	LARGO FL	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	☐ Change ☐ Addition
NAME	GUBNER, RICHARD MD	3.2 NAME	
STREET ADDRESS	2905 MILLSTREAM CT	3.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL	3.4 CITY-ST-ZIP	
TITLE	TDP	4.1 TITLE	TREASURER ☒ Change ☐ Addition
NAME	UMBERG, PAUL	4.2 NAME	UMBERG, PAUL
STREET ADDRESS	1551 SO BELCHER RD	4.3 STREET ADDRESS	2269 WILLOWBROOK DRIVE
CITY-ST-ZIP	CLEARWATER FL	4.4 CITY-ST-ZIP	CLEARWATER, FL, 34624
TITLE	SD	5.1 TITLE	SECRETARY ☒ Change ☐ Addition
NAME	BARRETT, MICHELLE M	5.2 NAME	MICHELLE B. DEW
STREET ADDRESS	406 AZEELE STR W #210	5.3 STREET ADDRESS	2341 GLENMOOR ROAD
CITY-ST-ZIP	TAMPA FL	5.4 CITY-ST-ZIP	CLEARWATER, FL. 34624
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	HALL, BETTY JEAN	6.2 NAME	
STREET ADDRESS	300 SO DUNCAN AVE #240	6.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Betty Jean Hall BETTY JEAN HALL 1/27/95 (813) 461-4054
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Area Code & Daytime Phone Number

000076