2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N31647

1. Entity Name

SOUTHEASTERN CHAPTER OF THE AMERICAN ASSOCIATION

May 15, 2000 8:00 am Secretary of State 03-14-2000 90028 044 ****61.25 Principal Place of Business Mailing Address %ST THOMAS UNIV LAW LIBRARY %ST THOMAS UNIV LAW LIBRARY 16400 NW 32ND AVE 16400 NW 32ND AVE MIAMI FL 33054-6459 MIAMI FL 33054 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 58-1592266 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) TEJEDA, PAULA ST. THOMAS UNIV LAW LIBRARY 16400 NW 32ND AVE City Zip Code MIAMI FL 33054 enity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. The above name SIGNATURE 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (66/6) Addition Delete TITLE ☐ Change TITLE NAME NAME BAUSCH, DONNA CR2E037 STREET ADDRESS STREET ADDRESS 1300 DOMINION TOWER, 999 WATERSIDE DR. CITY-ST-7IP CITY-ST-ZIP NORFOLK VA Hinckley, Steve Univ. of South CArolina Coleman Karesh Law Library Columbia, St. 25288 Delete Change . ☐ Addition TITLE TITLE NAME HINCKLEY, STEVEN NAME STREET ADDRESS STREET ADDRESS 3401 N FAIRFAX OR CITY-ST-ZIP CITY-ST-ZIP ARLINGTON VA 22201 ☐ Addition ☐ Delete Change TITLE SD s [) OSBALDISTON, DIANA NAME NAME STREET ADDRESS UNIV OF SOUTH CAROLINA COLEMAN & GREEN ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COLUMBUS SC 29108 TITLE Change ☐ Addition ☐ Delete T/ THILE NAME NAME WAMBOLD, SALLY STREET ADDRESS STREET ADDRESS UNIV. OF RICHMOND SCL. OF LAW LIB. CITY-ST-ZIP CITY-ST-ZIP RICHMAND VA 23173 Delete ☐ Change M Addition TITLE TITLE atherine Lehman aw Library of Louisiana Horeme Court Bullding Room 100 101 Coupla Avenue 102 Orleans, LA 70112 NAME NAME CROSSIN, KATHY STREET ADDRESS STREET ADDRESS 1100 PEACHTREE ST -STE 2800 CITY-ST-ZIP CITY-ST-ZIP atla<u>nt</u>a g<u>a 3</u>0309 · 🗀 Oelete Change Addition TITLE TITLE Due Burch Univs of Kentucky Law Library 520 Stimes Fone 40506 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZEP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

FILED