

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N33185

FILED
Jun 03, 2002 8:00 AM
Secretary of State

Entity Name: ASTHMA & ALLERGY FOUNDATION OF AMERICA, FLORIDA CHAPTER, INC.

Current Principal Place of Business:

11700 N 58TH ST
STE J
TAMPA, FL 33617 US

New Principal Place of Business:

Current Mailing Address:

11700 N 58TH ST
STE J
TAMPA, FL 33617 US

New Mailing Address:

FEI Number: 59-2695804

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTI, LEO B
11700 N 58TH ST
STE J
TAMPA, FL 33617 US

Name and Address of New Registered Agent:

SMALL, CHERYL J
11700 N 58TH ST
STE J
TAMPA, FL 33617 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: CHERYL J. SMALL

06/03/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TAYLOR, JAKE
Address: 5045 CAMBERLEY LANE
City-St-Zip: OLDSMAR, FL 34677

Title: VD () Delete
Name: OTTO, KARIN PH.D.
Address: 4002 EAGLE NEST DR
City-St-Zip: VALRICO, FL 33594

Title: M () Delete
Name: MATTI, LEO B
Address: 15701 BOVINE PL
City-St-Zip: TAMPA, FL 33624

Title: TD () Delete
Name: HARDY, IV G
Address: 109 N BRUSH STREET SUTE 300
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: MICHAUD, RONDA
Address: 2206 GREEN OAK LN
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: FRIEDRICH, DANIEL J III
Address: 6500 38TH AVE. N
City-St-Zip: ST. PETERSBURG, FL 33710

Title: M (X) Change () Addition
Name: CHERYL, SMALL J
Address: 11700 N. 58TH ST., N. SUITE J
City-St-Zip: TAMPA, FL 33617

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAKE TAYLOR

PD

06/03/2002

Electronic Signature of Signing Officer or Director

Date