

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000004641

FILED
Sep 05, 2002
Secretary of State

Entity Name: THE INTERNATIONAL EMERGENCY MANAGEMENT SOCIETY, INC.

Current Principal Place of Business:

DEPARTMENT ISE
303 WEIL HALL
GAINESVILLE, FL 32611

New Principal Place of Business:

Current Mailing Address:

DEPARTMENT ISE
303 WEIL HALL
GAINESVILLE, FL 32611

New Mailing Address:

FEI Number: 31-1567055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUFEKCI, SULEYMAN
DEPARTMENT OF ISE
303 WEIL HALL
GAINESVILLE, FL 32611 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HARRALD, JOHN
Address: GWU, 2023 K. STREET. NW
City-St-Zip: WASHINGTON, DC 20006

Title: TD () Delete
Name: NEWKIRK, ROSS
Address: 200 UNIVERSITY AVENUE
City-St-Zip: WATERLOO, ONTARIO, N2L3G1, CA CANADA

Title: D () Delete
Name: KOVALSKI, KATHLEEN M
Address: 5074 WEST LIBRARY AVENUE
City-St-Zip: BETHEL PARK, PA 15102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JOHN HARRALD

D

09/05/2002

Electronic Signature of Signing Officer or Director

Date