

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000004641

FILED  
Jun 16, 2014  
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:**

113 COLLEGIATE LOOP  
644 BELLAMY  
TALLAHASSEE, FL 32306 US

**Current Mailing Address:**

DEPARTMENT ISE  
303 WEIL HALL  
GAINESVILLE, FL 32611

**New Mailing Address:**

13220 NW 33RD AVE  
VANCOUVER, WA 98685 US

**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:**

CASSERLEIGH, DR. AUDREY  
113 COLLEGIATE LOOP  
644 BELLAMY  
TALLAHASSEE, FL 32306 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: AUDREY CASSERLEIGH

06/16/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DR  
Name: ROBERTSON, THOMAS V  
Address: 13220 NW 33RD AVE  
City-St-Zip: VANCOUVER, WA 98685 US

Title: DR  
Name: WHITE, CONNIE  
Address: 118 COLLEGE DRIVE #5106 TEC 336  
City-St-Zip: HATTIESBURG, MS 39406 US

Title: DR  
Name: HAGEN, JAMES C  
Address: 3700 W 103RD ST DRIEHAUS 3913  
City-St-Zip: CHICAGO, IL 60655 US

I hereby 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 all other like empowered.

SIGNATURE: THOMAS V ROBERTSON

DIR

06/16/2014

Electronic Signature of Signing Officer or Director

Date