

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

APPROVED  
AND  
FILED

06 SEP 13 PM 3:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # N96000004909

1. Entity Name

INTERNATIONAL ASSOCIATION OF ADAPTIVE  
SCIENCES, INC.



Principal Place of Business

842 MANGO DR.  
SUITE 101  
WEST PALM BEACH FL 33415

Mailing Address

842 MANGO DR.  
SUITE 101  
WEST PALM BEACH FL 33415

2. Principal Place of Business

842 MANGO DR

3. Mailing Address

842 MANGO DR.

Suite, Apt. #, etc.

Suite 101

Suite, Apt. #, etc.

Suite 101

City & State

WEST PALM BEACH

City & State

WEST PALM Bch

Zip

33415

Country

U.S.

Zip

33415

Country

U.S.

2nd MOORE

CR2E037 (4/06)

4. FEI Number

06-0898729

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

PANCHULA, LESLIE B DR  
842 MANGO DR.  
SUITE 101  
WEST PALM BEACH FL 33415

7. Name and Address of New Registered Agent

Name

Not Applicable

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Dr. Leslie B. Panchula

9/3/06

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25  
Due By September 6, 2006

9. Election Campaign Financing  
Trust Fund Contribution.



\$5.00 May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P.  
NAME PANCHULA, LESLIE B DR  
STREET ADDRESS 842 MANGO DR. SUITE # 3  
CITY-ST-ZIP WEST PALM BEACH FL 33415 ☐ Delete

TITLE VP  
NAME LEAMAN, KIMBERLY MS  
STREET ADDRESS 305 NE 16TH STREET  
CITY-ST-ZIP FORT LAUDERDALE FL ☐ Delete

TITLE SD  
NAME GONZALEZ, DALIA DR  
STREET ADDRESS 305 NE 16TH ST  
CITY-ST-ZIP WEST PALM BEACH FL 33309 ☐ Delete

TITLE T  
NAME PAUL GREGORY, NICHOLAS DR  
STREET ADDRESS 207 STERLING RD.  
CITY-ST-ZIP HOLLYWOOD, FL 33301 ☐ Delete

TITLE D  
NAME PEMBERTON, MACPHERSON DR  
STREET ADDRESS 842 MANGO DR. SUITE # 5  
CITY-ST-ZIP WEST PALM BEACH, FL. FL 33415 ☐ Delete

TITLE P  
NAME PANCHULA, LESLIE B PRES  
STREET ADDRESS 842 MANGO DR.  
CITY-ST-ZIP WEST PALM BEACH, FL 33415 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE 200079925392 ☐ Change ☐ Addition  
NAME 09/14/06--01041--010 \*\*\$61.25  
STREET ADDRESS SAME  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS SAME  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS SAME  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS SAME  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS SAME  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

Dr. Leslie B. Panchula

9/3/06

954-

534-4670

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