

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003301

FILED
Mar 29, 2007
Secretary of State

Entity Name: FLORIDA ACADEMY OF AUDIOLOGY, INC.

Current Principal Place of Business:

P.O. BOX 7257
SEMINOLE, FL 33775

New Principal Place of Business:

14864 ENCLAVE LAKES DR. #T-1
DELRAY BEACH, FL 33484

Current Mailing Address:

P.O. BOX 7257
SEMINOLE, FL 33775

New Mailing Address:

14864 ENCLAVE LAKES DR. #T-1
DELRAY BEACH, FL 33484

FEI Number: 65-0764913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIMON, DEBRA AU.D.
1600 SW ARCHER ROAD, SPEECH & HEARING CTR.
GAINESVILLE, FL 32610 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: SCHEITLER, DONNA LANGE AUD
Address: VAMC, P.O. BOX 5005
City-St-Zip: BAY PINES, FL 33744

Title: PED () Delete
Name: ALMOND, LISA AUD
Address: 701 MANATEE AVENUE WEST, SUITE 201
City-St-Zip: BRADENTON, FL 34205

Title: TD () Delete
Name: SHIMON, DEBRA AU.D.
Address: 1600 SW ARCHER ROAD, SPEECH & HEARING CTR.
City-St-Zip: GAINESVILLE, FL 32610

Title: VPED () Delete
Name: DANESH, ALI PH.D.
Address: 777 GLADES ROAD
City-St-Zip: BOCA RATON, FL 33431

Title: VMS () Delete
Name: YOUNKER, SUZANNE AU.D.
Address: 1250 NORTHPOINT PARKWAY
City-St-Zip: WEST PALM BEACH, FL 33407

Title: SD () Delete
Name: GANS, PATRICIA AU.D.
Address: 11290 PARK BLVD.
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ALMONG, LISA M AU.D.
Address: 701 MANATEE AVE. WEST, SUITE 201
City-St-Zip: BRADENTON, FL 34205

Title: TREA (X) Change () Addition
Name: SHIMON, DEBRA AU.D.
Address: 1600 SW ARCHER RD., SPEECH & HEARING CTR.
City-St-Zip: GAINESVILLE, FL 32610

Title: VPED (X) Change () Addition
Name: DANESH, ALI PH.D.
Address: 777 GLADES ROAD
City-St-Zip: BOCA RATON, FL 33431

Title: VPM (X) Change () Addition
Name: YOUNKER, SUZANNE AU.D.
Address: 1250 NORTHPOINT PARKWAY
City-St-Zip: WEST PALM BEACH, FL 33407

Title: SEC (X) Change () Addition
Name: SHELFER, JANET AU.D.
Address: 4500 SAN PABLO ROAD
City-St-Zip: JACKSONVILLE, FL 32224

Title: VPC (X) Change () Addition
Name: SAUL, RICHARD PH.D.
Address: 3200 S. UNIVERSITY DR.
City-St-Zip: FT. LAUDERDALE, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: LISA M. ALMOND, AU.D.

PRES

03/29/2007

Electronic Signature of Signing Officer or Director

Date