

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90030 050 ****70.00

DOCUMENT # N98000001931

1. Entity Name

AMERICAN HEMOCHROMATOSIS SOCIETY, INC.

Principal Place of Business

Mailing Address

777 E ATLANTIC AVE STE Z-363
 DELRAY BEACH FL 33483-5352

777 E ATLANTIC AVE STE Z-363
 DELRAY BEACH FL 33483-5352

00012001

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

Zip

Country

Zip

Country

65-0823619

Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SNYDER, DAVID
 955 INDIGO POINT
 DELRAY BEACH FL 33483

Name

David G. Snyder

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

1845 Bridgewater Drive

City

Heathrow

FL

Zip Code

32746

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.

SIGNATURE

David G. Snyder VP-Executive Director David Snyder 1/11/2002

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

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Delete
NAME	THOMAS, SANDRA A	
STREET ADDRESS	777 E ATLANTIC AVE STE Z-363	
CITY-ST-ZIP	DELRAY BEACH FL 33483-5352	
TITLE	D	<input type="checkbox"/> Delete
NAME	SNYDER, DAVID G	
STREET ADDRESS	777 E ATLANTIC AVE STE Z-363	
CITY-ST-ZIP	DELRAY BEACH FL 33483-5352	
TITLE	D	<input type="checkbox"/> Delete
NAME	MUNN, CINDY	
STREET ADDRESS	777 E ATLANTIC AVE STE Z-363	
CITY-ST-ZIP	DELRAY BEACH FL 33483-5352	
TITLE	D	<input type="checkbox"/> Delete
NAME	HUNTER, BARRY	
STREET ADDRESS	599 NW 14TH AVE	
CITY-ST-ZIP	BOCA RATON FL 33486-3229	
TITLE	D	<input type="checkbox"/> Delete
NAME	REULLY, CHRISTOPHER	
STREET ADDRESS	1692 NORTHERN BLVD	
CITY-ST-ZIP	LAUREL HOLLOW NY 11791	
TITLE	D	<input type="checkbox"/> Delete
NAME	SNYDER, DANIEL	
STREET ADDRESS	642 BURTON AVE	
CITY-ST-ZIP	HIGHLAND PARK IL 60035	

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sandra Thomas	
STREET ADDRESS	1845 Bridgewater Dr.	
CITY-ST-ZIP	Heathrow FL 32746-6910	
TITLE	Vice-President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	David Geisse Snyder	
STREET ADDRESS	1845 Bridgewater Dr.	
CITY-ST-ZIP	Heathrow, FL 32746-6910	
TITLE	Secretary	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Cindy Munn, RN	
STREET ADDRESS	742 Picketon Rd.	
CITY-ST-ZIP	Lucasville, OH 45648	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Daniel Snyder	
STREET ADDRESS	1206 Via Visalia	
CITY-ST-ZIP	San Clemente, CA 92672	

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *David G. Snyder* VP-Executive Director David Snyder 1/11/02 407-829-4488

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

Attachment
Doc# N198000001931

B0012851

American Hemochromatosis Society, Inc.

Officers & Directors:

Sandra Thomas
President/Founder
1845 Bridgewater Dr.
Heathrow, FL 32746-2012

David Geise Snyder
Vice-President/Executive Director
1845 Bridgewater Dr.
Heathrow, FL 32746-2012

Cindy Munn, RN
Secretary
742 Piketon Rd.
Lucasville, OH 45648

Sandra Spangler
Treasurer
1510 W. Calle Tiburon
Tucson, AZ 85704-1054

Directors:

Barry Hunter
599 NW 14th Ave.
Boca Raton, 33486-3229

Linda Hunter
599 NW 14th Ave.
Boca Raton, 33486-3229

Alison Reilly
1692 Northern Blvd.
Laurel Hollow, NY 11791

Christopher Reilly
1692 Northern Blvd.
Laurel Hollow, NY 11791

Attachment
DA# N980201931
B0012851

Daniel Snyder
1206 Via Visalia
San Clemente, CA 92672

Elisabeth Snyder, Esq.
1206 Via Visalia
San Clemente, CA 92672

Joseph Burghard Thomas
1845 Bridgewater Dr.
Heathrow, FL 32746-6910

As of 1/12/2002