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FILED

Feb 26 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P34449 (9)

1. Corporation Name

ASSOCIATION OF AVIAN VETERINARIANS, INC.

Principal Place of Business

Mailing Address

P.O. BOX 811720  
BOCA RATON FL 33481P.O. BOX 811720  
BOCA RATON FL 33481-17203. Date Incorporated or Qualified  
06/24/19913a. Date of Last Report  
03/15/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

11-2651082

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FREEDMAN, ADINA RAE  
876 NW 22ND AVENUE  
BOCA RATON FL 33486

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ED ☐ DELETE  
NAME FREEDMAN, ADINA RAE  
STREET ADDRESS 376 NW 22 AVE  
CITY-ST-ZIP BOCA RATON FL1.1 TITLE ED ☐ Change ☐ Addition  
1.2 NAME Freedman, Adina Rae  
1.3 STREET ADDRESS 376 NW 22 Ave  
1.4 CITY-ST-ZIP Boca Raton FLTITLE D ☒ DELETE  
NAME MURRAY, MICHAEL J  
STREET ADDRESS 2 HARRIS CT STE A1  
CITY-ST-ZIP MONTEREY CA2.1 TITLE Director ☐ Change ☒ Addition  
2.2 NAME Doolen, Michael  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP Oakhurst, NJTITLE VP ☐ DELETE  
NAME OLSEN, GLENN  
STREET ADDRESS PATUXENT WILDLIFE RESEARCH CENTER  
CITY-ST-ZIP LAUREL MD3.1 TITLE President ☒ Change ☐ Addition  
3.2 NAME Olsen, Glenn  
3.3 STREET ADDRESS Patuxent Wildlife Research Center  
3.4 CITY-ST-ZIP Laurel, MDTITLE P ☒ DELETE  
NAME OROSZ, SUSAN E  
STREET ADDRESS P O BOX 1071 COLLEGE VET MED  
CITY-ST-ZIP KNOXVILLE TN4.1 TITLE Director ☐ Change ☒ Addition  
4.2 NAME Speer, Brian L.  
4.3 STREET ADDRESS 3807 Main Street  
4.4 CITY-ST-ZIP Oakley, CA 94561TITLE D ☐ DELETE  
NAME LABONDE, JERRY  
STREET ADDRESS 6900 SOUTH HOLLY CIRCLE  
CITY-ST-ZIP ENGLEWOOD CO5.1 TITLE Vice President ☒ Change ☐ Addition  
5.2 NAME Labonde, Jerry  
5.3 STREET ADDRESS 6900 South Holly Circle  
5.4 CITY-ST-ZIP Englewood, COTITLE D ☒ DELETE  
NAME CURTIS-VELASCO, MICHELLE  
STREET ADDRESS 4711 HWY 17  
CITY-ST-ZIP SO ORANGE FL6.1 TITLE Treasurer ☐ Change ☒ Addition  
6.2 NAME Linnetz, Lawrence  
6.3 STREET ADDRESS 595 Clark Avenue  
6.4 CITY-ST-ZIP Bristol, CT 06010

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/19/97

561/393-8901

CR2E037 (9/96)