## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 01, 2001 8:00 am Secretary of State DOCUMENT # **P38956** 1. Entity Name THE A.K. RICE INSTITUTE, INCORPORATED 05-01-2001 90097 049 \*\*\*\*61.25 Principal Place of Business Mailing Address 19586 TRAILS END TERRACE 19586 TRAILS END TERRACE JUPITER FL 33458 JUPITER FL 33458 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 41-1262454 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: **\$5.00** May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Change ☐ Addition CR2E037 (10/00) WINDERMAN, BARBARA NAME NAME STREET ADDRESS 3206 ABERDEEN WAY STREET ADDRESS CITY-ST-7IP HOUSTON TX CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition Addition NAME MILLER, ROSE S NAME Claudia J. Anderson, Ph.D. STREET ADDRESS 1530 GREEN ST STREET ADDRESS 6300 West Loop South, #405 CITY-ST-ZIP PHILADELPHIA PA CITY-ST-7IP Bellaire, TX 77401 TITLE ☐ Delete TITL F Addition ☐ Change MIZE, TIMOTHY I NAME NAME STREET ADDRESS 85 GLEN RD STREET ADDRESS CITY-ST-ZIP **BOSTON MA 02130** CITY-ST-ZIP TITLE Delete TITLE Change D Addition ANDERSON, CLAUDIA J PH.D. NAME NAME Julie Troy STREET ADDRESS 4747 BELLAIRE BLVD, #342 STREET ADDRESS 343 West 84th Street, #9 CITY-ST-ZIP **BELLAIRE TX 77401** CITY-ST-ZIP New York, NY 10024 TITLE TITLE Delete ☐ Change X Addition NAME NOUMAIR, DEBRA A NAME Marjorie V. Lane STREET ADDRESS 200 W 79TH ST #12-G STREET ADDRESS 11751 Arbor Glen Way CITY-ST-ZIP NY NY CITY-ST-ZIP Reston, VA 20194 TITLE Delete TITLE Change Addition NAME LUNA, DAVID Rose S. Miller STREET ADDRESS 4025 N TRIPP STREET ADDRESS 1530 Green Street

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 120 Copy. For a Statute Sturther 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: BOLLAND WEB TO A FIGURE TO SIGNING OFFICER OR DIRECTOR

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CHICAGO IL 60641