2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State
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Entity Name: FLORIDA ACADEMY OF AUDIOLOGY, INC.

Current Principal Place of Business:

99 SE MIZNER BLVD
#233
BOCA RATON, FL 33432

Current Mailing Address:

PO BOX 8685
DELRAY BEACH, FL 33482

FEI Number: 65-0764913

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAXIM MANAGEMENT
99 SE MIZNER BLVD
#233
BOCA RAON, FL 33432 US

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

Officer/Director Detail :

Title	PAST PRESIDENT
Name	AUNGST, HOLLE AU.D.
Address	PO BOX 8685
City-State-Zip:	DELRAY BEACH FL 33482

Title	PRESIDENT ELECT
Name	HALL, JAMES W
Address	PO BOX 8685
City-State-Zip:	DELRAY BEACH FL 33482

Title	VPCO
Name	ULMER, DANA AU.D.
Address	PO BOX 8685
City-State-Zip:	DELRAY BEACH FL 33482

Title	EXECUTIVE DIRECTOR
Name	BROOKE, RACHEL M
Address	PO BOX 8685
City-State-Zip:	DELRAY BEACH FL 33482

Title	TREASURER
Name	SIMON, CINDY AU.D.
Address	PO BOX 8685
City-State-Zip:	DELRAY BEACH FL 33482

Title	SEC
Name	WEIST, DEVON AU.D.
Address	PO BOX 8685
City-State-Zip:	DELRAY BEACH FL 33482

Title	PRESIDENT
Name	SHIMON, DEBRA
Address	PO BOX 8685
City-State-Zip:	DELRAY BEACH FL 33482

I hereby 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 all other like empowered.

SIGNATURE: RACHEL M. BROOKE EXECUTIVE DIRECTOR 01/09/2015

Electronic Signature of Signing Officer/Director Detail — Date