

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 11, 2002 8:00 am**  
**Secretary of State**

04-11-2002 90703 014 \*\*\*\*70.00

DOCUMENT # N01000002157  
1. Entity Name  
FAALAS Inc.

**DO NOT WRITE IN THIS SPACE**

763537

2. Principal Place of Business  
C/O University of Miami  
Division of Veterinary Resources  
1600 NW 10th Ave. Rm. 1113  
City & State  
Miami, Florida

3. Mailing Address  
Same as 2  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

4. FEI Number  
59-1009532  
Applied For  
Not Applicable

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

6. 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.

7. Name and Address of Current Registered Agent

Name Julie Koivisto  
Street Address (P.O. Box Number is Not Acceptable)  
C/O University of Miami, Div. of Vet. Resources  
1600 NW 10th Avenue, Rm. 1113  
City Miami FL Zip Code 33136

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

FEE IS \$61.25  
Initial or Amended UBR

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	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President - 2002 (P) Ramona Bober Mail Code: B10-3 Kennedy Space Center, FL 32899
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Elect - 2002 (V) Faith Conkle 4500 San Pablo Rd. Jacksonville, FL 32224
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary (S) Julie Koivisto 1600 NW 10th Ave. Miami, FL 33136
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer (T) Sandi Manattaa 12901 Bruce B. Downs Blvd. MDC Box 54 Tampa, FL 33612
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Council Member John Soto 13000 Bruce B. Downs Blvd. (151) Tampa, FL 33612
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Council Member Don Bradford 7780 NW 53rd St. Miami, FL 33166

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: *[Handwritten Signature]* 3/12/02 12901 Bruce B. Downs Blvd

CR2E037B (12/01)

FAALAS Officers - 2002 (Continued)

Council Member

Mike Wiltshire  
101 Biomedical Research Facility  
Tallahassee, FL 32306-4341

Attachment  
Document #  
NO1000002157

763537