

Filing Fee: \$50.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Division of Business Services
148 W. River Street
Providence, Rhode Island 02904-2615

NON-PROFIT CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY

Pursuant to the provisions of Section 7-6-74 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign non-profit corporation hereby applies for a Certificate of Authority to conduct affairs in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is American College of Veterinary Anesthesia and Analgesia
2. It is incorporated under the laws of State of Tennessee, USA
3. The date of its incorporation is 10/10/1984
4. The address of its principal office is College of Vet Med, University of TN, 2407 River Rd Knoxville, TN 37996-4539
5. The address of its proposed registered office in Rhode Island is 2246 E Main Rd apt D
(Street Address, not P.O. Box)
Portsmouth (City/Town), RI 02871 (Zip Code) and the name of its proposed registered agent in Rhode Island at that address is Lynne Iris Kushner
(Name of Agent)

6. The specific purpose or purposes which it proposes to pursue in conducting its affairs in Rhode Island are:

For the executive secretary/treasurer to maintain a bank account in the name of the corporation
Collection of monies paid by the membership and other entities, donations to the Foundation
For the purpose of paying bills relating to the business of the corporation

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7. The names and respective addresses of its directors and officers are:

	<u>Name</u>	<u>Address</u>
Director	<u>Ann Weil</u>	<u>Purdue University 625 Harrison St W Lafayette IN 47907-2026</u>
Director	<u>Lydia Love</u>	<u>46 Cedar Lake West, Denville, NJ 07834-1704</u>
Director	<u>Elizebeth Martinez</u>	<u>Vet Med, Texas A&M Univ, College Station, TX 77843-4474</u>
President	<u>Lesley J. Smith</u>	<u>University of WI, SVM, 2015 Linden Dr., Madison, WI 53706</u>
Vice President	<u>Christine Egger</u>	<u>Vet Med, Univ of TN, 2407 River Drive, Knoxville TN 37996-0001</u>
Treasurer	<u>Lynne Kushner</u>	<u>2246 E Main Rd apt D Portsmouth, R.I. 02871</u>
Secretary	<u>Lynne Kushner</u>	<u>as above</u>

8. This application is accompanied by certified copies of its articles of incorporation and all amendments thereto, duly authenticated by the secretary of state or other authorized officer of the jurisdiction of its incorporation.

Under penalty of perjury, I declare and affirm that we have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 01/04/2016

American College of Veterinary Anesthesia and Analgesia

Print Exact Name of Corporation Making Application



X

Signature of President Vice President (check one)



Signature of Secretary Assistant Secretary (check one)



STATE OF TENNESSEE
Tre Hargett, Secretary of State
Division of Business Services
William R. Snodgrass Tower
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

DR. LYDIA DONALDSON
PO BOX 1100
MIDDLEBURG, VA 20118-1100

Request Type: Certified Copies
Request #: 188471

Issuance Date: 12/21/2015
Copies Requested: 1

Document Receipt

Receipt #: 002353662 Filing Fee: \$20.00
Payment-Check/MO - AMERICAN COLLEGE OF VETERINARY ANESTHESIOLOGISTS, MIDL \$20.00

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that **American College of Veterinary Anesthesia and Analgesia**, Control # 147225 was formed or qualified to do business in the State of Tennessee on 10/10/1984. American College of Veterinary Anesthesia and Analgesia has a home jurisdiction of TENNESSEE and is currently in an Active status. The attached documents are true and correct copies and were filed in this office on the date(s) indicated below.


Tre Hargett
Secretary of State

Processed By: Nichole Hambrick

The attached document(s) was/were filed in this office on the date(s) indicated below:

<u>Reference #</u>	<u>Date Filed</u>	<u>Filing Description</u>
497 02312	10/10/1984	Initial Filing
664 01596	01/27/1987	Registered Agent Change (by Entity)
667 00696	02/10/1987	Articles of Amendment
5014-2944	01/22/2004	2003 Annual Report (Due 02/01/2004)
5280-1265	11/15/2004	2004 Annual Report (Due 02/01/2005)
5989-0462	03/16/2007	2006 Annual Report (Due 04/01/2007)
6657-2476	02/19/2010	2009 Annual Report (Due 04/01/2010)
7129-1908	01/07/2013	Articles of Amendment
7145-0617	02/08/2013	2012 Annual Report (Due 04/01/2013)
7280-0802	02/03/2014	2013 Annual Report (Due 04/01/2014)

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SECRETARY OF STATE
1994 OCT 10 PM 1:47

CHARTER OF
AMERICAN COLLEGE OF VETERINARY
ANESTHESIOLOGISTS

The undersigned natural person or persons, having capacity to contract and acting as incorporator of a corporation under the Tennessee General Corporation Act, adopts the following charter for such corporation:

1. The name of the corporation is American College of Veterinary Anesthesiologists.

2. The duration of the corporation is perpetual.

3. The address of the principal office of the corporation in the state of Tennessee shall be 1517 Hightop Trail, city of Knoxville, county of Knox.

4. The corporation is not for profit.

5. The purpose or purposes for which the corporation is organized are:

1) To establish, evaluate and maintain the highest standards in the practice of veterinary anesthesiology by promoting establishment of educational facilities and clinical and research training in veterinary anesthesiology at the undergraduate and post-doctoral levels.

2) To establish criteria of fitness for the designation of a specialist in the practice of veterinary anesthesiology.

3) To advise the Council on Education of the A.V.M.A. on matters concerning approval of veterinary anesthesiology training programs.

4) To arrange and conduct examinations to determine the competence in veterinary anesthesiology of veterinarians who apply and to issue certificates to those who meet the required standards. The major criteria on which judgment of competence shall be based included:

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ARTICLE 12.8.1.3

a. Technical facility

Facility in providing for all technical services required for practice of the specialty and for training the specialist in veterinary anesthesiology.

b. Medical judgment

Medical decision making appropriate to solution of medical problems which arise during the practice of anesthesiology.

c. Scholarship

The talent, training and habits of study conducive to the maintenance of high standards of achievement and to the competencies to develop, evaluate and apply new knowledge in veterinary anesthesia.

5) To serve the public, veterinary profession, hospitals and veterinary schools and colleges by preparing a list for publication of veterinarians certified by the College.

6) The purposes for which the American College of Veterinary Anesthesiologists is organized are exclusively scientific and educational within the meaning of Section 501 (c) (3) of the Internal Revenue Code of 1954 or the corresponding provision of any future United States Internal Revenue Law. Notwithstanding, and any other provision of these articles, this organization shall not carry on any other activities not permitted to be carried on by an organization exempt from Federal Income Tax under Section 501 (c) (3) of the Internal Revenue Code of 1954 or the corresponding provision of any future United States Internal Revenue Law.

6. This corporation is to have members. The types of membership and qualifications therefore shall be defined in the by-laws of the corporation.

7. Upon dissolution of the corporation, its remaining assets, if any, shall be distributed to the American Veterinary Medical Association Foundation for so long as it retains its tax exempt status under Section 501 (c) (3) of the Internal Revenue Code. Should the American Veterinary Medical Association

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ARTICLE 10

Foundation lose its tax exempt status, the assets of the corporation shall be distributed to another scientific or educational organization properly qualified for tax exempt status under Section 501 (c) (3) of the Internal Revenue Code. Should the corporation be unable to make such distribution, that distribution shall then be made by the Chancery Court of the County in which the registered office of the corporation is then located to another organization so qualified in which, in the judgment of the Court, will best accomplish the general purposes for which the corporation was organized.

DATED this 8th day of October, 1984.

Robert C. N. [Signature]
Incorporator

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DESIGNATION, REVOCATION OR CHANGE
OF REGISTERED AGENT OF
AMERICAN COLLEGE OF VETERINARY
ANESTHESIOLOGISTS

To the Secretary of State of the State of Tennessee:


Pursuant to the provisions of Section 48-1201 of the Tennessee General Corporation Act, the undersigned incorporator of a domestic corporation being organized under the Act submits the following statement for the purpose of designating the registered agent for the corporation in the State of Tennessee.

1. The name of the corporation is American College of Veterinary Anesthiologists.

The address of corporation shall be 1517 Hightop Trail, Knoxville, Tennessee 37923.

2. The name and street address of its registered agent in the State of Tennessee shall be Dr. Robert Paddleford, 1517 Hightop Trail, Knoxville, Tennessee 37923.

DATED this 8th day of October, 1984.


ROBERT R. PADDLEFORD, D.V.M.
Incorporator

<input type="checkbox"/> CORPORATION ANNUAL REPORT STATE OF TENNESSEE SECRETARY OF STATE	<p style="text-align: right;">THIS REPORT IS DUE ON OR BEFORE FEBRUARY 1, 1987</p>
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READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

<p>(1) CORPORATION CONTROL NUMBER: <u>0147225</u> THIS REPORT WILL NOT BE FILED WITHOUT THIS NUMBER</p> <p>(1) (b) NAME AND ADDRESS OF CORPORATION: AMERICAN COLLEGE OF VETERINARY ANESTHESIOLOGISTS 1517 HIGHTOP TRAIL KNOXVILLE TN 37923</p> <p>D 10/10/84 NOT FOR PROFIT IF THE ABOVE ADDRESS IS INCORRECT IN ANY WAY, PLEASE CORRECT IN BLOCK 2</p>	<p>(2) ENTER CHANGE OF ADDRESS OF CORPORATION'S PRINCIPAL OFFICE IN THE STATE OF INCORPORATION.</p> <p>STREET ADDRESS <u>7024 REGENCY ROAD</u></p> <p>P.O. BOX NUMBER</p> <p>CITY <u>KNOXVILLE</u></p> <p>STATE <u>TN</u> ZIP CODE <u>37931</u></p> <p>NOTICE: ADDRESS CHANGE ENTERED ON THIS REPORT WILL NOT BE OF RECORD. SEE INSTRUCTIONS.</p> <p>(3) FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN) <u>581-56-3574</u></p>
<p>(4) PRINCIPAL OFFICE OR PLACE OF BUSINESS IN TENNESSEE IF A FOREIGN CORPORATION: STREET ADDRESS <u>N/A</u> CITY, STATE, ZIP CODE <u>N/A</u></p>	

(5) NAMES AND STREET AND MAILING ADDRESSES OF EACH OFFICER MUST BE COMPLETED: (ATTACH SEPARATE SHEET IF NECESSARY.)			
TITLE	NAME	STREET AND MAILING ADDRESS	CITY, STATE, ZIP CODE
PRESIDENT	<u>A. THOMAS EVANS</u>	<u>7131 E. CUTLER RD, R.R. 2,</u>	<u>BATH, ME 48808</u>
VICE PRESIDENT	<u>JOHN HUBBELL</u>	<u>1935 COFFEY ROAD</u>	<u>COLUMBUS, OHIO 43210</u>
SECRETARY	<u>ROBERT R. PADDLEFORD</u>	<u>7024 REGENCY ROAD</u>	<u>KNOXVILLE, TN 37931</u>
TREASURER			

(6) NAMES AND STREET AND MAILING ADDRESSES OF BOARD OF DIRECTORS MUST BE COMPLETED: (ATTACH SEPARATE SHEET IF NECESSARY.)			
NAME	STREET AND MAILING ADDRESS	CITY, STATE, ZIP CODE	
<u>A. THOMAS EVANS</u>	<u>see above</u>		
<u>JOHN HUBBELL</u>	<u>see above</u>		
<u>ROBERT R. PADDLEFORD</u>	<u>see above</u>		
<u>JOHN BEASON</u>	<u>COLLEGE OF VETERINARY MEDICINE</u>	<u>Urbana, IL 61801</u>	

<p>(7) NAME AND ADDRESS OF REGISTERED AGENT: PADDLEFORD ROBERT 1517 HIGHTOP TRAIL KNOXVILLE TN 37923</p>	<p>(8) CURRENT REGISTERED AGENT, IF DIFFERENT FROM BLOCK 7 OR NOT ON RECORD:</p> <p>NAME <u>ROBERT PADDLEFORD</u></p> <p>STREET ADDRESS <u>7024 REGENCY ROAD</u></p> <p>CITY, STATE, ZIP CODE <u>KNOXVILLE, TN 37931</u></p>
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(9) THE NATURE AND CHARACTER OF THE BUSINESS IN WHICH THE CORPORATION IS ENGAGED IS:

VETERINARY SERVICES **OTHER SERVICES, NOT CLASSIFIED**

REMIT TEN DOLLARS (\$10.00), MADE PAYABLE TO TENNESSEE SECRETARY OF STATE. (CHECKS OR MONEY ORDERS ARE PREFERRED)

MAIL REMITTANCE AND COMPLETED FORM TO:
 TENNESSEE SECRETARY OF STATE
 JAMES K. POLK BUILDING, SUITE 500
 NASHVILLE, TENN. 37219

599369

(10) UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE EXAMINED THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE, CORRECT AND COMPLETE.

SIGNATURE [Signature]

TITLE EXECUTIVE SECRETARY

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SECRETARY OF STATE
1987 FEB 10 AM 9:18

Form No. 6
Section 48-1-303

ARTICLES OF AMENDMENT TO THE CHARTER

OF

THE AMERICAN COLLEGE OF VETERINARY ANESTHESIOLOGISTS

Pursuant to the provisions of Section 48-1-303 of the Tennessee General Corporation Act, the undersigned corporation adopts the following articles of amendment to its charter:

1. The name of the corporation is:

~~The American College of Veterinary Anesthesiologists~~

2. The amendment adopted is (Insert Amendment):

The address of the American College of Veterinary Anesthesiologists shall be changed from 1517 Hightop Trail, Knoxville, TN 37923 to 7024 Regency Road, Knoxville, TN 37931.

3. The amendment was duly adopted (at a meeting (by the unanimous ~~action~~ consent) of the ~~(shareholders)~~ (members) on October 23, 1986. (Strike inapplicable words)

4. If a corporation for profit, the manner, if not set forth in such amendment, in which any exchange, reclassification or cancellation of issued shares provided for in the amendment shall be effected is as follows:

5. If the amendment is not to be effective when these articles are filed by the Secretary of State, the date it will be effective is _____, 19____ (not later than thirty (30) days after such filing).

Dated: 9 February 1987

The American College of Veterinary Anesthesiologists
Name of Corporation

By: [Signature]

Signature

CORPORATION ANNUAL REPORT

Annual Report Filing Fee Due:

\$20, if no changes are made in block #6 to the registered agent/office, or
\$40, if any changes are made in block #6 to the registered agent/office

Please return completed form to:
TENNESSEE SECRETARY OF STATE
Attn: Annual Report
312 Eighth Ave. N, 6th Floor
William R. Snodgrass Tower
Nashville, TN. 37243

CURRENT FISCAL YEAR CLOSING MONTH: 10 IF DIFFERENT,
CORRECT MONTH IS _____

THIS REPORT IS DUE ON OR BEFORE 02/01/04

(1) SECRETARY OF STATE CONTROL NUMBER: 0147225

(2A) NAME AND MAILING ADDRESS OF CORPORATION:

**AMERICAN COLLEGE OF VETERINARY
ANESTHESIOLOGISTS
7024 REGENCY RD
KNOXVILLE, TN 37931**

D 10/10/1984 NON-PROFIT

(2B) STATE OR COUNTRY OF INCORPORATION:

TENNESSEE

(2C) ADD OR CHANGE MAILING ADDRESS:

**748 Martin Mill Pike
Rockford, TN 37853-9999**

(3) A. PRINCIPAL ADDRESS INCLUDING CITY, STATE, ZIP CODE:
7024 REGENCY ROAD, KNOXVILLE, TN 37931

B. CHANGE OF PRINCIPAL ADDRESS:

<u>STREET</u>	<u>CITY</u>	<u>STATE</u>	<u>ZIP CODE + 4</u>
748 MARTIN MILL PIKE	ROCKFORD	TN	37853-9999

(4) NAME AND BUSINESS ADDRESS, INCLUDING ZIP CODE, OF THE PRESIDENT, SECRETARY AND OTHER PRINCIPAL OFFICERS.
(ATTACH ADDITIONAL SHEET IF NECESSARY.)

NAME	TITLE	BUSINESS ADDRESS	CITY, STATE, ZIP CODE + 4
PETER HELLYER	PRESIDENT	4429 GRAY FOX RD.	FORT COLLINS, CO 80526-5004
TOM DOHERTY	SECRETARY	9404 CONTINENTAL DR.	KNOXVILLE, TN 37922

(5) BOARD OF DIRECTORS (NAME, BUSINESS ADDRESS INCLUDING ZIP CODE). (ATTACH ADDITIONAL SHEET IF NECESSARY.)

OR LISTED BELOW	NAME	BUSINESS ADDRESS	CITY	STATE	ZIP CODE + 4

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(6) A. NAME OF REGISTERED AGENT AS APPEARS ON SECRETARY OF STATE RECORDS:

ROBERT PADDLORD

B. REGISTERED ADDRESS AS APPEARS ON SECRETARY OF STATE RECORDS:

7024 REGENCY RD, KNOXVILLE, TN 37931

C. INDICATE BELOW ANY CHANGES TO THE REGISTERED AGENT NAME AND/OR REGISTERED OFFICE.

(6) CHANGE OF REGISTERED AGENT:

(7) CHANGE OF REGISTERED OFFICE:

<u>STREET</u>	<u>CITY</u>	<u>STATE</u>	<u>ZIP CODE + 4</u>	<u>COUNTY</u>
748 MARTIN MILL PIKE	ROCKFORD	TN	37853-9999	BLount

(7) A. THIS BOX APPLIES ONLY TO NONPROFIT CORPORATIONS. OUR RECORDS REFLECT THAT YOUR NONPROFIT CORPORATION IS A PUBLIC BENEFIT OR A MUTUAL BENEFIT CORPORATION AS INDICATED: IF BLANK OR INCORRECT, PLEASE CHECK APPROPRIATE BOX:

PUBLIC

PUBLIC
 MUTUAL

B. IF A TENNESSEE RELIGIOUS CORPORATION, PLEASE CHECK BOX IF BLANK.

RELIGIOUS

(8) SIGNATURE

Thomas Doherty

(9) DATE

Jan 19th, 2004

(10) TYPE PRINT NAME OF OFFICER:

THOMAS DOHERTY

(11) TITLE OF OFFICER:

Executive Director

* THIS REPORT MUST BE DATED AND SIGNED *

CORPORATION ANNUAL REPORT

Please return completed form to:
TENNESSEE SECRETARY OF STATE
 Attn: Annual Report
 312 Eighth Ave. N, 6th Floor
 William R. Snodgrass Tower
 Nashville, TN. 37243

Annual Report Filing Fee Due:
 \$20, if no changes are made in block #6 to the registered agent/office, or
 \$40, if any changes are made in block #6 to the registered agent/office

CURRENT FISCAL YEAR CLOSING MONTH: 10 IF DIFFERENT: _____
 CORRECT MONTH IS: 12 THIS REPORT IS DUE ON OR BEFORE: 02/01/05

(1) SECRETARY OF STATE CONTROL NUMBER: 0147225

(2A) NAME AND MAILING ADDRESS OF CORPORATION

**AMERICAN COLLEGE OF VETERINARY
 ANESTHESIOLOGISTS
 748 MARTIN MILL PIKE**

ROCKFORD, TN 37853-9999



D 10/10/1984 NON-PROFIT

(2B) STATE OR COUNTRY OF INCORPORATION:

TENNESSEE

(2C) ADD OR CHANGE MAILING ADDRESS:

2511 CR 500 E
 Mahomet, IL 61853-9714

(3) A. PRINCIPAL ADDRESS INCLUDING CITY, STATE, ZIP CODE
 748 MARTIN MILL PIKE, ROCKFORD, TN 37853-9999

B. CHANGE OF PRINCIPAL ADDRESS:

STREET	CITY	STATE	ZIP CODE + 4
2511 CR 500 E	Mahomet	IL	61853-9714

(4) NAME AND BUSINESS ADDRESS, INCLUDING ZIP CODE, OF THE PRESIDENT, SECRETARY AND OTHER PRINCIPAL OFFICERS
 (ATTACH ADDITIONAL SHEET IF NECESSARY)

TITLE	NAME	BUSINESS ADDRESS	CITY, STATE, ZIP CODE + 4
PRESIDENT	Peter Hellyer	Colorado State University	Fort Collins, CO 80523
SECRETARY	John Benson	2511 CR 500 E	Mahomet, IL 61853-9714
President Elect	John Oadhem	379 East Campus Drive	Columbia, MO 65211

(5) BOARD OF DIRECTORS (NAMES, BUSINESS ADDRESS INCLUDING ZIP CODE) (ATTACH ADDITIONAL SHEET IF NECESSARY.)

OR LISTED BELOW:	NAME	BUSINESS ADDRESS	CITY, STATE, ZIP CODE + 4
	Nigel Caultkett	University of Saskatchewan, 52 Campus Drive	Saskatoon Saskatchewan S7N 5W4
	Janece Cornick-Seburn	629 Craig Lane	Georgetown, KY 40324
	David Brunson	2015 Linden Drive W	Madison, WI 53706

(6) A. NAME OF REGISTERED AGENT AS APPEARS ON SECRETARY OF STATE RECORDS

ROBERT PADDLFORD

B. REGISTERED ADDRESS AS APPEARS ON SECRETARY OF STATE RECORDS

748 MARTIN MILL PIKE, ROCKFORD, TN 37853-9999

C. INDICATE BELOW ANY CHANGES TO THE REGISTERED AGENT NAME AND/OR REGISTERED OFFICE

(i) CHANGE OF REGISTERED AGENT: Thomas Ooherty

(ii) CHANGE OF REGISTERED OFFICE: University of Tennessee College of Veterinary Medicine
 STREET: 2407 River Drive CITY: Knoxville STATE: TN ZIP CODE + 4: 37992-4545 COUNTY: _____

(7) A. THIS BOX APPLIES ONLY TO NONPROFIT CORPORATIONS. OUR RECORDS REFLECT THAT YOUR NONPROFIT CORPORATION IS A PUBLIC BENEFIT OR A MUTUAL BENEFIT CORPORATION AS INDICATED. IF BLANK OR INCORRECT, PLEASE CHECK APPROPRIATE BOX: PUBLIC MUTUAL

B. IF A TENNESSEE RELIGIOUS CORPORATION, PLEASE CHECK BOX IF BLANK RELIGIOUS

(8) SIGNATURE: *John Benson*

(9) DATE: 11-9-04

(10) TYPE PRINT NAME OF SIGNER: John Benson

(11) TITLE OF SIGNER: Executive Secretary, ACVA

** THIS REPORT MUST BE DATED AND SIGNED **



CORPORATION ANNUAL REPORT

Annual Report Filing Fee Due:
 \$20, if no changes are made in block #6 to the registered agent/office, or
 \$40, if any changes are made in block #6 to the registered agent/office.

Please return completed form to:
TENNESSEE SECRETARY OF STATE
 Attn: Annual Report
 312 Eighth Avenue N. 6th Floor
 William R. Snodgrass Tower
 Nashville, TN 37243

CURRENT FISCAL YEAR CLOSING MONTH: 12

THIS REPORT IS DUE ON OR BEFORE: 04/01/07

(1) SECRETARY OF STATE CONTROL Number: 0147225

(2A.) NAME AND MAILING ADDRESS OF CORPORATION

AMERICAN COLLEGE OF VETERINARY
 ANESTHESIOLOGISTS
 2511 CR 500 E

MAHOMET, IL 61853-9714



D 10/10/1984 NON-PROFIT

(2B.) STATE OR COUNTRY OF INCORPORATION

TENNESSEE

(2C.) ADD OR CHANGE MAILING ADDRESS:

P.O. Box 1100
 Middleburg

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 STATE OF TENNESSEE
 2007 MAR 16 AM 10:09
 RILEY DARNELL
 SECRETARY OF STATE

(3) A. PRINCIPAL ADDRESS INCLUDING CITY, STATE, ZIP CODE:

2511 CR 500 E, MAHOMET, TN 61853-9714

B. CHANGE OF PRINCIPAL ADDRESS:

STREET

CITY

STATE

CODE

P.O. Box 1100, 22499 Polecat Hill Road Middleburg VA 20118-1100

(4) NAME AND BUSINESS ADDRESS, INCLUDING ZIP CODE, OF THE PRESIDENT, SECRETARY AND OTHER PRINCIPAL OFFICERS.
 (ATTACH ADDITIONAL SHEET IF NECESSARY.)

Title	Name	Business Address	City, State, Zip Code + 4
President	John Dodam	379 East Campus Dr	Columbus, MO 65211
Secretary	Lydia Donaldson	P.O. Box 1100	Middleburg, VA 20118
Res Elect	David Martin	334 Old Salem Rd	Barrington, IL 60010

(5) BOARD OF DIRECTORS (NAMES, BUSINESS ADDRESS INCLUDING ZIP CODE.) (ATTACH ADDITIONAL SHEET IF NECESSARY.)

SAME AS ABOVE, NONE, OR LISTED BELOW:

Name	Business Address	City, State, Zip Code, + 4
Victoria Lupasik	12076 Leander Mountain Rd	Marietta, AZ 85253
Glenn Peltier	Suite 117 920 Yonge St	Toronto, ON M4W 3C7 CA
Stephanie Berry	2407 River Drive	Blacksburg, VA 24061
Thomas Doherty	College of Veterinary Medicine	Knoxville, TN 37996
Lydia Donaldson	2407 River Drive	Knoxville, TN 37996
Chris Mealen	1552 Boyd Ave, West 233	St. Paul, MN 55108
	252 Middleburg Hill	Carrollts, OR 97331

(6) A. NAME OF REGISTERED AGENT AS APPEARS ON SECRETARY OF STATE RECORDS:

THOMAS DOHERTY

B. REGISTERED ADDRESS AS APPEARS ON SECRETARY OF STATE RECORDS:

2407 RIVER DRIVE, UT COLLEGE OF VET MD, KNOXVILLE, TN 37991-4545

C. INDICATE BELOW ANY CHANGES TO THE REGISTERED AGENT NAME AND/OR REGISTERED OFFICE.

(i.) CHANGE OF REGISTERED AGENT: _____

(ii.) CHANGE OF REGISTERED OFFICE (Street Address): _____

(City) _____

(State) TN (Zip Code + 4) _____

(County) _____

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 2007 FEB 21 AM 8:25
 RILEY DARNELL
 SECRETARY OF STATE

(7) A. THIS BOX APPLIES ONLY TO NONPROFIT CORPORATIONS. OUR RECORDS REFLECT THAT YOUR NONPROFIT CORPORATION IS A PUBLIC BENEFIT OR A MUTUAL BENEFIT CORPORATION AS INDICATED:

IF BLANK OR INCORRECT, PLEASE CHECK APPROPRIATE BOX: PUBLIC MUTUAL

PUBLIC

B. IF A TENNESSEE RELIGIOUS CORPORATION, PLEASE CHECK BOX IF BLANK RELIGIOUS

(8) SIGNATURE

Lydia Donaldson

(9) DATE

2/15/07

(10) TYPE/PRINT NAME OF SIGNER

Lydia Donaldson

(11) TITLE OF SIGNER

Executive Secretary

**** THIS REPORT MUST BE DATED AND SIGNED ****



5989.0462
 5955.1079



Tennessee Corporation Annual Report Form

AR Filing #: 02142877

Status: Unsubmitted

File online at: <http://TNBear.TN.gov/AR>

Due on/Before: 04/01/2010

Please return completed form to:

Tennessee Secretary of State
Attn: Annual Reports
312 Rosa L. Parks Avenue
6th Floor, William R. Snodgrass Tower
Nashville, TN 37243
Phone: (615) 741-2286

Annual Report Filing Fee Due:

\$20 if no changes are made in block 3 to the registered agent/office, or
\$40 if any changes are made in block 3 to the registered agent/office

SOS Control Number: 147225

Corporation Non-Profit - Domestic

Date Formed: 10/10/1984

Formation Locale: Knox County

(1) Name and Mailing Address:

AMERICAN COLLEGE OF VETERINARY
PO BOX 1100
MIDDLEBURG, VA 20118-1100 USA

(2) Principal Office Address:

22499 POLECAT HILL
PO BOX 1100
MIDDLESBURG, VA 20117 USA

(3) Registered Agent (RA) and Registered Office (RO) Address: Agent Changed: No

THOMAS DOHERTY
2407 RIV DR
UT COLLEGE OF VET MD
KNOXVILLE, TN 379914545 USA

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STATE OF TENNESSEE
2010 FEB 19 AM 9:52
SECRETARY OF STATE

(4) Name and business address (with zip code) of the President, Secretary and other principal officers.

Title	Name	Business Address	City, State, Zip
President	Robert E Meyer	College of Veterinary Medicine	Mississippi State, MS 39762-6100
President-Elect	Bruno H Pypendop	University of California School of	Davis, CA 95616
Secretary	Lydia L Donaldson	P.O. Box 1100	Middleburg, VA 20118-1100

(5) Board of Directors names and business address (with zip code). (___ None)

Name	Business Address	City, State, Zip
Stephanie H Berry	12409 Chadsworth Place	Glen Allen, VA 23059
Sophie G Cuveliez	Faculty of Veterinary Medicine, University of	3200 Sicotte Street, CP 5000 Saint
Thomas J Doherty	College of Veterinary Medicine, University of	Knoxville, TN 37996-0001
Frank Golder	University of Pennsylvania School of Veterinary	Philadelphia, PA 19104
Nora Matthews	Texas A & M University, College of Veterinary	College Station, TX 77843-4473
Craig A Mosley	1988 Kootenay Street	Vancouver BC V5M 4Y3
Leslie J Smith	University of Wisconsin, School of Veterinary	Madison, WI 53706
Eugene P Steffey	4809 Caravelle Drive	Fort Collins, CO 80526

(6) This section applies to non-profit corporations ONLY.

A. Our records reflect that your non-profit corporation is a public benefit or a mutual benefit corporation as indicated.

If blank or incorrect, please check appropriately: Public Mutual

B. If a Tennessee religious corporation, please check here if blank: Religious

(7) Signature: _____

Lydia Donaldson

(8) Date: _____

Feb 16, 2010

(9) Type/Print Name: _____

Lydia Donaldson

(10) Title: _____

Secretary

Instructions: Legibly complete the form above. Enclose a check made payable to the Tennessee Secretary of State in the amount of \$20.00. Sign and date this form and return to the address provided above. Additional instructions at http://tn.gov/sos/bus_srv/annual_reports.htm

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7129.1908, 01/07/2013, 09:04:50, Received by Tennessee Secretary of State Tre Hargett

State of Tennessee



Department of State
Corporate Filings
312 Rosa L. Parks Avenue
6th Floor, William R. Snodgrass Tower
Nashville, TN 37243

ARTICLES OF AMENDMENT
TO THE CHARTER
(Nonprofit)

For Office Use Only

Corporate Control Number (If Known) 147225

Pursuant to the provisions of section 48-60-105 of *The Tennessee Nonprofit Corporation Act*, the undersigned corporation adopts the following articles of amendment to its charter:

1. Please insert the name of the corporation as it appears of record:
American College of Veterinary Anesthesiologists
If changing the name, insert the new name on the line below:
American College of Veterinary Anesthesia and Analgesia ✓

2. Please check the block that applies:
 Amendment is to be effective when filed by the secretary of state.
 Amendment is to be effective, _____ (month, day, year)
(Not to be later than the 90th day after the date this document is filed.) If neither block is checked, the amendment will be effective at the time of filing.

3. Please insert any changes that apply:
a. Principal address: _____ (Street) _____ (City) _____ (State/County) _____ (Zip Code)
b. Registered agent: _____
c. Registered address: _____ (Street) _____ (City) _____ (State/County) _____ (Zip Code)
d. Other changes: _____

4. The corporation is a nonprofit corporation.

5. The manner (if not set forth in the amendment) for implementation of any exchange, reclassification, or cancellation of memberships is as follows:

6. The amendment was duly adopted on December 8, 2012 (month, day, year)
by (please check the block that applies):
 The incorporators without member approval, as such was not required.
 The board of directors without member approval, as such was not required.
 The members

7. Indicate which of the following statements applies by checking the applicable block:
 Additional approval for the amendment (as permitted by §48-60-301 of the tennessee nonprofit corporation act) was not required.
 Additional approval for the amendment was required by the charter and was obtained.

Executive Secretary
Signer's Capacity

Lydia Donaldson
Signature

January 1, 2013
Date

Lydia Donaldson, VMD, PhD, Dipl. ACVA
Name of Signer (typed or printed)



Tennessee Corporation Annual Report Form

AR Filing #: 03324310
SUBMISSION PENDING

File online at: <http://TNBear.TN.gov/AR>

Due on/Before: 04/01/2013

Reporting Year: 2012

Please return completed form to:

Tennessee Secretary of State
Attn: Annual Reports
William R. Snodgrass Tower
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102
Phone: (615) 741-2286

Annual Report Filing Fee Due:

\$20 if no changes are made in block 3 to the registered agent/office, or
\$40 if any changes are made in block 3 to the registered agent/office

SOS Control Number: 147225
Corporation Non-Profit - Domestic

Date Formed: 10/10/1984

Formation Locale: TENNESSEE

(1) Name and Mailing Address:
American College of Veterinary Anesthesia and Analgesia
PO BOX 1100
MIDDLESBURG, VA 20118-1100

(2) Principal Office Address:
22499 POLECAT HILL ROAD
MIDDLESBURG, VA 20117

(3) Registered Agent (RA) and Registered Office (RO) Address:
THOMAS DOHERTY
UT COLLEGE OF VET MD
2407 RIVER DR
KNOXVILLE, TN 37996-4539

Agent Changed: No
Agent County: BLOUNT COUNTY

(4) Name and business address (with zip code) of the President, Secretary and other principal officers.

Title	Name	Business Address	City, State, Zip
President	Bruno H Pypendop	UNIVERSITY OF CALIFORNIA SCHOOL	DAVIS, CA 95616
Secretary	Lydia L Donaldson	P.O. Box 1100	Middleburg, VA 20118-1100
President-Elect	Khursheed Mama	Colorado State University College of	Fort Collins, CO 80523

(5) Board of Directors names and business address (with zip code).

Name	Business Address	City, State, Zip
Elizabeth Martinez	TEXAS A & M UNIVERSITY, COLLEGE OF	COLLEGE STATION, TX 77843-4473
Leslie J Smith	University of Wisconsin, School of Veterinary	Madison, WI 53706
Eugene P Steffey	4809 Caravelle Drive	Fort Collins, CO 80526
Matthew Read	University of Calgary Faculty of Veterinary Medicine	3330 Hospital Drive NW Calgary, AB T2N
Andre Shih	University of Florida College of Veterinary Medicine	Gainesville, FL 32610-0136
Erik Hofmeister	COLLEGE OF VETERINARY MEDICINE,	ATHENS, GA 30602
Stuart Clark-Price	University of Illinois School of Veterinary Med.	Urbana, IL 61802
Melissa Sinclair	Ontario Veterinary College	Guelph, Ontario N1G 2W1

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If blank or incorrect, please check appropriately: Public Mutual
- B. If a Tennessee religious corporation, please check here if blank: Religious

(7) Signature: Lydia Donaldson

(8) Date: February 5, 2013

(9) Type/Print Name: Lydia Donaldson

(10) Title: Executive Secretary

Instructions: Legibly complete the form above. Enclose a check made payable to the Tennessee Secretary of State in the amount of \$20.00. Sign and date this form and return to the address provided above. Additional instructions at http://tn.gov/sos/bus_srv/annual_reports.htm

7145.0617, 02/08/2013, 09:33:55, Received by Tennessee Secretary of State Tre Hargett



Tennessee Corporation Annual Report Form

AR Filing #: 03951975
SUBMISSION PENDING

File online at: <http://TNBear.TN.gov/AR>

Due on/Before: 04/01/2014

Reporting Year: 2013

Return completed form within 30 days to:

Tennessee Secretary of State

Attn: Annual Reports

William R. Snodgrass Tower

312 Rosa L. Parks AVE, 6th FL

Nashville, TN 37243-1102

Annual Report Filing Fee Due:

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SOS Control Number: 147225

Corporation Non-Profit - Domestic

Date Formed: 10/10/1984

Formation Locale: TENNESSEE

(1) Name and Mailing Address:

American College of Veterinary Anesthesia and Analgesia
PO BOX 1100
MIDDLEBURG, VA 20118-1100

(2) Principal Office Address:

22499 POLECAT HILL ROAD
MIDDLEBURG, VA 20117

(3) Registered Agent (RA) and Registered Office (RO) Address:

THOMAS DOHERTY
UT COLLEGE OF VET MD
2407 RIVER DR
KNOXVILLE, TN 37996-4539

Agent Changed: No

Agent County: BLOUNT COUNTY

(4) Name and business address (with zip code) of the President, Secretary and other principal officers.

Title	Name	Business Address	City, State, Zip
President	Khursheed Mama	COLORADO STATE UNIVERSITY	FORT COLLINS, CO 80523
Secretary	Lydia L Donaldson	P.O. Box 1100	Middleburg, VA 20118-1100
President-Elect	Lesley Smith	UNIVERSITY OF WISCONSIN SCHOOL	MADISON, WI 53706

(5) Board of Directors names and business address (with zip code). ___ None, or listed below.

Name	Business Address	City, State, Zip
Elizabeth Martinez	TEXAS A & M UNIVERSITY, COLLEGE OF	COLLEGE STATION, TX 77843-4473
Ann Weil	PURDUE UNIVERSITY SCHOOL OF	WEST LAFAYETTE, IN 47907-2028
Colin Dunlop	P.O. BOX 524	NORTH RYDE NSW 1670
Matthew Read	University of Calgary Faculty of Veterinary Medicine	3330 Hospital Drive NW Calgary, AB T2N
Andre Shih	University of Florida College of Veterinary Medicine	Gainesville, FL 32610-0136
Erik Hofmeister	COLLEGE OF VETERINARY MEDICINE,	ATHENS, GA 30602
Stuart Clark-Price	University of Illinois School of Veterinary Med.	Urbana, IL 61802
Melissa Sinclair	Ontario Veterinary College	Guelph, Ontario N1G 2W1

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If blank or incorrect, please check appropriately: Public ___ Mutual

B. If a Tennessee religious corporation, please check here if blank: ___ Religious

(7) Signature:

(8) Date: January 29, 2014

(9) Type/Print Name: Lydia Donaldson, VMD, PhD, Dipl. ACVAA

(10) Title: Executive Secretary

Instructions: Legibly complete the form above. Enclose a check made payable to the Tennessee Secretary of State in the amount of \$20.00. Sign and date this form and return to the address provided above.

7280.0802, 02/03/2014, 09:52:57, Received by Tennessee Secretary of State Tre Hargett



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

