

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010 Filing Period: June 1 - June 30 • Filing Fee: \$20.00* • THIS REPORT MUST BE TYPED OR PRINTED & FGIRLY IN BU

401.222.3040

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* In accordance with R.I.G.L.	7-6-94, each corporation failing	or refusing to file its annual:	report within the time prescribed b	law (R.I.G.L. 7-6-91) is subject to a
penalty fee of \$25.00.	, , , , , , , , , , , , , , , , , , ,		-part and and some presentation	" and (101.0.1.) " 0.71) is subject to it

permity jet of \$20.00.	J						
1. Corporate ID No.	2. Name of Cor	2. Name of Corporation					
505967	Academy of	Academy of Veterinary Zoological Medicine Technicians					
3. State of Incorporation		ldress in Rbode Island - Street		City	Zip		
Rhode Island	1000 Elmv	vood Avenue		Providence	RI		
5. Foreign corporation. Enter principal office address			City	State	Zip		
6. Brief Description of the cha	tracter of the affairs whi	ch are actually conducted in R	hode Island				
Promote continuing ed	ducation and disse	mination of knowledge r	elating to zoological medicine	e			
7. NAMES AND ADDR	ESSES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT) [FILL IN SPA	CES BEFORE USING ATTA	CHMENTS		
President Name			Vice President Name	<u> </u>			
Joan Maurer			Bonnie Soule	Bonnie Soule			
Street Address			Street Address				
2429 North 58th Stre	eet		1000 Elmwood Av	enue			
City	State	Ζip	City	State	Zip		
Milwaukee	WI	53210	Providence	RI	02907		
Secretary Name			Treasurer Name				
Jennifer Gordon			Dianna Lydick	Dianna Lydick			
Street Address			Street Address				
1875 Noble Avenue			12101 Johnny Cake Ridge Road				
City	State	Zip	City	State	Zip		
Bridgeport	CT	06610	Apple Valley	MN	55124		
			ATTACHMENT) TILL IN SPA				
THE NUMBER OF DIR	RECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL	NOT BE LESS THAN THR	EE (3). R.I.G.L. 7-6-23		
Director Name			Director Name				
Jeff Turnage			Kim Williams				
Street Address			Street Address				
4742 Mansfield Street	et #4		825 Crestview Cou	ırt			
City	State	Zip	City	State	Zip		
San Diego	CA	92116	San Marcos	CA	92078		
Director Name		<u>-</u>	Director Name				
Jeanette Fuller			Margot Monti				
Street Address			Street Address				
3080 Sprucewood La	ane		4001 SW Canyon	Road			
City	State	Zip	City	State	Zψ		
Escondido	CA	92027	Portland	OR	97221		
9. REGISTERED AGEN	T IN RHODE ISLA	ND			•		
This information is curre	ently of record in th	e Office of the Secretary of	of State. Changes require filing	of Form 641 - R.I.G.L. 7-6-1	3/7-6-78		
This report	must be signed by	either the President, Vic	e President, Secretary, Assista	ant Secretary, Treasurer, Rec	ceiver or Trustee		
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File Date	
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Check No. JUN 2 1 2010	
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FOR SECRETARY OF STATE USE ONLY	

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Under penalty of perjury, I declare and report, including any accompanying sel statements contained herein after true and	nedules and statements, and that all
Borne Soule	(o·15.2010
Signature of Officer	Date
Bonnie Soule	
Print or Type Name of Officer	
Vice President	

Title of Officer