



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

**ANNUAL REPORT YEAR:** 2011

**1. Corporate ID No.** 000505967

**2. Name of Corporation** Academy of Veterinary Zoological Medicine Technicians (AVZMT)

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 1000 ELMWOOD AVENUE

City or Town: PROVIDENCE

State: RI Zip: 02907 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

AVZMT WILL PROVIDE A PROCESS BY WHICH VETERINARY TECHNICIANS MAY BECOME CERTIFIED AS A VETERINARY TECHNICIAN SPECIALIST.

**7. Names and Addresses of the Officers and Directors:**

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOAN MAURER	2429 NORTH 58TH STREET MILWAUKEE, WI 53210 USA
TREASURER	DIANNA L LYDICK	12101 JOHNNY CAKE RIDGE RD APPLE VALLEY, MN 55124 USA
SECRETARY	JEN GORDON	1875 NOBLE AVE BRIDGEPORT, CT 06610 USA
VICE PRESIDENT	BONNIE SOULE	1000 ELMWOOD AVE PROVIDENCE, RI 02907 USA
DIRECTOR	JEFF TURNAGE	4742 MANSFIELD STREET #4 SAN DIEGO, CA 92116 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

BONNIE SOULE 1000 ELMWOOD AVENUE PROVIDENCE , RI 02907

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.**

*Signed this 9 Day of February, 2012 at 3:10:36 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By DIANNA LYDICK

Signature of Officer of the Corporation

President or  Vice President or  Secretary or  Assistant Secretary or

Treasurer or  Receiver or  Trustee (check one)

**This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.**

Form No. 631  
Revised 09/07

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