

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001857

FILED
Apr 02, 2012
Secretary of State

Entity Name: OHIO RIVER REGIONAL CHAPTER OF THE AMERICAN ASSOCIATION OF CLINICAL
ENDOCRINOLOGISTS, INC.

Current Principal Place of Business:

245 RIVERSIDE AVE
SUITE 200
JACKSONVILLE, FL 322024933 US

New Principal Place of Business:

Current Mailing Address:

245 RIVERSIDE AVENUE
SUITE 200
JACKSONVILLE, FL 322024933 US

New Mailing Address:

FEI Number: 20-8498169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, DONALD C
245 RIVERSIDE AVE, SUITE 200
JACKSONVILLE, FL 322024933 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: LOHANO, VASDEV MD
Address: 2315 GREEN VALLEY RD. #100
City-St-Zip: NEW ALBANY, IN 47150 US

Title: ST
Name: SYED, MUSHTAQ MD
Address: 119 PROFESSIONAL CTR, SUITE 206
City-St-Zip: INDIANA, IN 15701 US

Title: VP
Name: WILLIAMS, SUSAN E MD
Address: 9500 EUCLID AVENUE
City-St-Zip: CLEVELAND, OH 44195 US

Title: CEO
Name: JONES, DONALD C
Address: 245 RIVERSIDE AVENUE, SUITE 200
City-St-Zip: JACKSONVILLE, FL 32202

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: DONALD C. JONES

CEO

04/02/2012

Electronic Signature of Signing Officer or Director

Date