

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42283

FILED
Jan 11, 2010
Secretary of State

Entity Name: HEALTH PHYSICS SOCIETY OF FLORIDA, INC.

Current Principal Place of Business:

5316 NW 46 TERRACE
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 358534
GAINESVILLE, FL 326358534

New Mailing Address:

FEI Number: 59-2348201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNYDER, GEORGE
5316 NW 46 TERR
GAINESVILLE, FL 32653. 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: PE
Name: TIMM, JASON
Address: 130 SCRIPPS WAY, #3B1
City-St-Zip: JUPITOR, FL 33458

Title: T
Name: SNYDER, GEORGE
Address: 5316 NW 46 TERR
City-St-Zip: GAINESVILLE, FL 32653

Title: PP
Name: BURRESS, PAUL
Address: 945 W JEFFERSON ST
City-St-Zip: TALLAHASSEE, FL 32306

Title: S
Name: PHILLIPS, MIKE
Address: 5504 DANSBY PLACE
City-St-Zip: TALLAHASSEE, FL 32311

Title: D
Name: NICKELL, RODNEY
Address: 1724 HARBOR DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: P
Name: INBORNONE, CAROLANNE
Address: 608 E ALMONTE DR 3100
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: GEORGE SNYDER

T

01/11/2010

Electronic Signature of Signing Officer or Director

_____ Date