

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38239

FILED
Apr 30, 2012
Secretary of State

Entity Name: SOUTH FLORIDA VETERANS AFFAIRS FOUNDATION FOR RESEARCH AND EDUCATION, INC.

Current Principal Place of Business:

1201 NW 16TH ST
#2A103
MIAMI, FL 33125 US

New Principal Place of Business:

Current Mailing Address:

1201 NW 16TH ST
#2A103
MIAMI, FL 33125 US

New Mailing Address:

FEI Number: 65-0207903 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JACKSON, ROBERT M M.D.
1201 NW 16TH STREET
2A103
MIAMI, FL 33125 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: JACKSON, ROBERT M M.D.
Address: 1201 NW 16TH ST
City-St-Zip: MIAMI, FL 33125

Title: D
Name: DEGENNARO, VINCENT A M.D.
Address: 1201 NW 16TH ST
City-St-Zip: MIAMI, FL 33125

Title: ED
Name: GONZALEZ, LUIS A MHA
Address: 1201 NW 16TH STREET
City-St-Zip: MIAMI, FL 33125

Title: D
Name: ROSNER, CURT A CPA
Address: 1201 NW 16TH STREET
City-St-Zip: MIAMI, FL 33125

Title: D
Name: RECTOR, BRANSON P
Address: 1201 NW 16TH STREET
City-St-Zip: MIAMI, FL 33125

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: LUIS GONZALEZ

ED

04/30/2012

Electronic Signature of Signing Officer or Director

_____ Date