

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750432

**Entity Name:** THE LEE COUNTY MEDICAL SOCIETY, INC.**Current Principal Place of Business:**13770 PLANTATION ROAD  
SUITE 1  
FT MYERS, FL 33912**Current Mailing Address:**13770 PLANTATION ROAD  
SUITE 1  
FT MYERS, FL 33912 US**FEI Number: 23-7026263****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILKE, ANN  
13770 PLANTATION ROAD  
SUITE 1  
FORT MYERS, FL 33912 US*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**Officer/Director Detail :**

Title DPP  
Name FARAHMAND, AUDREY E MD  
Address 14090 METROPOLIS AVENUE STE 102  
City-State-Zip: FORT MYERS FL 33912

Title TREASURER  
Name SKINNER, SHARI L MD  
Address 8381 RIVERWALK PARK BLVD STE 101  
City-State-Zip: FORT MYERS FL 33919

Title D  
Name CARIOBA, JOANNA CMD  
Address 1255 VISCAYA PARKWAY STE 200  
City-State-Zip: CAPE CORAL FL 33990

Title SECRETARY  
Name BURDZY, JON DO  
Address 7780-C CAMBRIDGE MANOR PLACE  
City-State-Zip: FORT MYERS FL 33907

Title VP  
Name OAKES-LOTTRIDGE, ANDREW J MD  
Address 1315 FLORIDA AVENUE  
City-State-Zip: FORT MYERS FL 33901

Title PRESIDENT  
Name MOURADADE, MARY M MD  
Address 7981 GLADIOLUS DRIVE  
City-State-Zip: FORT MYERS FL 33908

Title EXECUTIVE DIRECTOR  
Name WILKE, ANN EXEC DIR  
Address 13770 PLANTATION ROAD STE 1  
City-State-Zip: FORT MYERS FL 33912

*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: ANN WILKE****EXECUTIVE DIRECTOR****01/29/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date