

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757892

FILED
Mar 21, 2019
Secretary of State
1020593606CC

Entity Name: CAPITAL MEDICAL SOCIETY FOUNDATION, INC.

Current Principal Place of Business:

1204 MICCOSUKEE ROAD
TALLAHASSEE, FL 32308

Current Mailing Address:

1204 MICCOSUKEE ROAD
TALLAHASSEE, FL 32308 US

FEI Number: 59-2104510

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

IRWIN, PAMELA
1204 MICCOSUKEE ROAD
TALLAHASSEE, FL 32308 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: PAMELA WILSON

03/21/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title T
Name WASSON, KENNETH MD
Address 133 OAK ST #19
City-State-Zip: TALLAHASSEE FL 32308

Title T
Name WILLIAMS, BARBARA MD
Address 2191 MILLER LANDING RD
City-State-Zip: TALLAHASSEE FL 32312

Title EMERITUS
Name MCCULLY, AL MD
Address 730 LIVE OAK PLANTATION
City-State-Zip: TALLAHASSEE FL 32312

Title PRESIDENT
Name MAHONEY, JOHN MD
Address 2920 IVANHOE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title T
Name SHEEDY, J. BRIAN MD
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title VP
Name COLON, WALT DMD
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title T
Name DOLL, AVON DR.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title T
Name HELLGREN, TRACEY DR.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Continues on page 2

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: PAMELA IRWIN

EXECUTIVE DIRECTOR

03/21/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title T
Name JONES, DAVID DR.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title ESQ
Name COX, J. ALAN DR.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title EMERITUS
Name WILLIAMS, CHARLES DR.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title T
Name GAMBLE, TERREZE DR.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title EXECUTIVE DIRECTOR
Name IRWIN, PAMELA
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title T
Name EDWARDS, MARLISHA M.D.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title T
Name MUNASIFI, FAISAL M.D.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title SECRETARY
Name LOEFFLER, NANCY DR.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title T
Name WALTON, JAY DDS
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title T
Name BROWN-SPEIGHTS, JOEDRECKA DR.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title PRESIDENT
Name LOCKWOOD, MARIBEL DR.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title EMERITUS
Name LINDSEY, FRED M.D.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title T
Name FORTUNAS, PAULA M.D.
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308

Title PRESIDENT-ELECT
Name WHITHAUS, KEN MD
Address 1204 MICCOSUKEE ROAD
City-State-Zip: TALLAHASSEE FL 32308