

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769772

Entity Name: SOUTH MIAMI MEDICAL SQUARE ASSOCIATION, INC.

Current Principal Place of Business:

7330 SW 62ND PLACE
SOUTH MIAMI, FL 33143

Current Mailing Address:

C/O POINTE GROUP ADVISORS
13762 W STATE ROAD 84 SUITE 615
DAVIE, FL 33325-5304 US

FEI Number: 59-2352227

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HENDERSON, MARIA
C/O POINTE GROUP ADVISORS
13762 W STATE ROAD 84 SUITE 615
DAVIE, FL 33325-5304 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: MARIA HENDERSON

02/26/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title T
Name EISERMANN, JUERGEN
Address 7300 SW 62 PLACE SUITE 405
City-State-Zip: SOUTH MIAMI FL 33143

Title VP
Name WENDSCHUH, PETER H
Address 7330 S.W. 62ND PLACE SUITE 300
City-State-Zip: MIAMI FL 33143

Title S
Name WETTER, PAUL A
Address 7330 S.W. 62ND PLACE SUITE 410
City-State-Zip: MIAMI FL 33143

Title PRESIDENT
Name SERURE, ALAN MD
Address 7330 S.W. 62ND PLACE SUITE 200
City-State-Zip: MIAMI FL 33143

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: WENDSCHUH , PETER H

VICE PRESIDENT

02/26/2014

Electronic Signature of Signing Officer/Director Detail

Date