

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000001562

**Entity Name:** SOUTHERN SOCIETY OF ENDOCRINOLOGISTS, INC.

**Current Principal Place of Business:**

1100 E. WOODFIELD ROAD  
SUITE 350  
SCHAUMBURG, IL 60173

**Current Mailing Address:**

1100 E. WOODFIELD ROAD  
SUITE 350  
SCHAUMBURG, IL 60173 US

**FEI Number:** 56-2294666

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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:** JANICE NULL, OBO INCORP SERVICES, INC.

03/25/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title IMMEDIATE PAST PRESIDENT  
Name CARLSON, MICHAEL MD  
Address FIRST CLINIC  
330 23RD AVENUE NORTH STE 500  
City-State-Zip: NASHVILLE TN 37203

Title PRESIDENT  
Name USDAN, LISA MD  
Address UT METHODIST PHYSICIANS  
ENDOCRINOLOGY  
57 GERMANTOWN COURT SUITE 100  
City-State-Zip: MEMPHIS TN 38108

Title PRESIDENT-ELECT  
Name WARRINER, AMY HOTH MD  
Address UAB HOSPITAL - HIGHLANDS  
1201 11TH AVENUE SOUTH SUITE 500  
City-State-Zip: BIRMINGHAM AL 35205

Title TREASURER  
Name CHADHA, MONISHA MD  
Address LEONARD J. CHABERT MEDICAL  
CENTER  
1978 INDUSTRIAL BLVD.  
City-State-Zip: HOUMA LA 70363

Title SECRETARY  
Name SOHN, JENNIFER MD  
Address SOUTHVIEW MEDICAL GROUP  
833 ST. VINCENT'S DRIVE, PO BOX III  
SUITE 300  
City-State-Zip: BIRMINGHAM AL 35205

*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:** MONISHA CHADHA, MD

TREASURER

03/25/2021

Electronic Signature of Signing Officer/Director Detail

Date