

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008902

Entity Name: ADVOCATES TO THE FLORIDA OSTEOPATHIC MEDICAL ASSOCIATION, INC.

Current Principal Place of Business:

2544 BLAIRSTONE PINES DRIVE
TALLAHASSEE, FL 32301

Current Mailing Address:

2544 BLAIRSTONE PINES DRIVE
TALLAHASSEE, FL 32301 US

FEI Number: 59-6135812

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GLANTZ, JENA
2544 BLAIRSTONE PINES DRIVE
TALLAHASSEE, FL 32301 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 PRESIDENT
Name BURNS, JANET
Address 4095 SCARLET IRIS PLACE
City-State-Zip: WINTER PARK FL 32792

Title TREASURER
Name THACKER, SHERRY
Address 9381 WINTER CREEK COURT
City-State-Zip: TALLAHASSEE FL 32309

Title VP
Name PINELESS, EDY R
Address 559 TIMBER RIDGE DRIVE
City-State-Zip: LONGWOOD FL 32779

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: JANET BURNS

PRESIDENT

04/16/2018

Electronic Signature of Signing Officer/Director Detail

_____ Date