

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011082

FILED
Feb 22, 2019
Secretary of State
2814125972CC

Entity Name: SOUTHEAST SOCIETY OF HEALTH-SYSTEM PHARMACISTS, INC.

Current Principal Place of Business:

6700 NE 21ST DR
FT LAUDERDALE, FL 33308

Current Mailing Address:

6700 NE 21ST DR
FT LAUDERDALE, FL 33308 US

FEI Number: 26-2396447

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CURRAN, MATTHEW
6700 NE 21ST DR
FT LAUDERDALE, FL 33308 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: MATTHEW CURRAN

02/22/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name SHAH, MUKESH DR.
Address 1195 GASPARILLA DRIVE NE
City-State-Zip: ST. PETERSBURG FL 33702

Title S
Name LIPKIN, ELIZABETH
Address 2526 DELMAR
City-State-Zip: FT. LAUDERDALE FL 33301

Title PE, OTHER
Name CURRAN, MATTHEW
Address 6700 NE 21ST DR
City-State-Zip: FT LAUDERDALE FL 33308

Title S
Name SALEM, JOSEPH
Address 4094 NW 89TH WAY
City-State-Zip: COOPER CITY FL 33024

Title T
Name ARZOLA, MARIBETH
Address 6700 NE 21ST DR
City-State-Zip: FT LAUDERDALE FL 33308

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: MATTHEW CURRAN

OFFICER SESH P

02/22/2019

Electronic Signature of Signing Officer/Director Detail

Date