

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011426

Entity Name: NATIONAL PARATHYROID EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

2400 CYPRESS GLEN DRIVE
WESLEY CHAPEL, FL 33544

Current Mailing Address:

2400 CYPRESS GLEN DRIVE
WESLEY CHAPEL, FL 33544

FEI Number: 27-1450561

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORMAN, JAMES MD
2400 CYPRESS GLEN DRIVE
WESLEY CHAPEL, FL 33544 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	D	Title	D
Name	NORMAN, JAMES MD	Name	EDWARDS, MICHAEL MD
Address	4907 LONDONDERRY DR	Address	1121 EDWARDS ROAD
City-State-Zip:	TAMPA FL 33647	City-State-Zip:	CINCINNATI OH 45208

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: JAMES NORMAN

OWNER

04/05/2016

Electronic Signature of Signing Officer/Director Detail

Date