## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004117

Entity Name: MIAMI DADE STROKE CONSORTIUM, INC.

FILED Feb 27, 2014 Secretary of State CC1929291876

## **Current Principal Place of Business:**

2150 CORAL WAY 8TH FLOOR MIAMI, FL 33145

# **Current Mailing Address:**

2150 CORAL WAY 8TH FLOOR MIAMI, FL 33145 US

FEI Number: 45-2885002 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 P Title S

Name HORSTMYER, JEFFREY L DR. Name FORTEZA, ALEJANDRO M DR.

Address 3661 SOUTH MIAMI AVE, SUITE 209 Address 3801 BISCAYNE BLVD, SUITE 230

City-State-Zip: MIAMI FL 33133 City-State-Zip: MIAMI FL 33137

Title D

Name CURRY, JOHN

Address 2815 SALZEDO STREET

City-State-Zip: MIAMI FL 33134

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: JEFFREY L. HORSTMYER

DIRECTOR

02/27/2014