

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000007416

**Entity Name:** FMDA-THE FLORIDA SOCIETY FOR POST-ACUTE AND LONG-TERM CARE MEDICINE, INC.

**FILED**  
**Jan 23, 2020**  
**Secretary of State**  
**2542329457CC**

**Current Principal Place of Business:**

400 EXECUTIVE CENTER DRIVE, STE 208  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

400 EXECUTIVE CENTER DRIVE, STE 208  
WEST PALM BEACH, FL 33401 US

**FEI Number: 81-3438184**

**Certificate of Status Desired: No**

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

CORECARE ASSOCIATES, INC.  
400 EXECUTIVE CENTER DRIVE, STE 208  
WEST PALM BEACH, FL 33401 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: IAN CORDES

01/23/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name HOCK, LEONARD JR., DO  
Address 1531 W. PALMETTO PARK RD  
City-State-Zip: BOCA RATON FL 33486

Title PAST PRESIDENT, OTHER  
Name RANDALL, RHONDA DO  
Address 48 INTERLAKEN ROAD  
City-State-Zip: ORLANDO FL 32801

Title STD  
Name HAMES, ELIZABETH MD, CMD  
Address 3200 S. UNIVERSITY DR  
City-State-Zip: FT. LAUDERDALE FL 33328

Title PRESIDENT  
Name TAFUR, ANGEL MD, CMD  
Address 1503 BUENOS AIRES BLVD.  
BLDG. 160  
City-State-Zip: THE VILLAGES FL 32159

Title VP  
Name SANDERS-CEPADA, DIANE DO, CMD  
Address 2705 NW 83RD WAY  
City-State-Zip: COOPER CITY FL 33024

*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: ANGEL TAFUR

PRESIDENT

01/23/2020

Electronic Signature of Signing Officer/Director Detail

Date