2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000006914

Entity Name: FLORIDA ASSOCIATION MEDICAL STAFF SERVICES, INC.

FILED
Apr 07, 2024
Secretary of State
8546196562CC

Current Principal Place of Business:

5475 SE 22ND PLACE OCALA. FL 34480

Current Mailing Address:

5475 SE 22ND PLACE OCALA. FL 34480 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRENNAN, MANNA & DIAMOND, P.L. 5210 BELFORT ROAD SUITE 400 JACKSONVILLE, FL 32256 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 Title TREASURER

Name DESIMONE, CPCS, CPMSM, LORI-JO Name BROOKS, CPCS, CPMSM, LISA

Address 1002 VINEYARD LANE Address 5475 SE 22ND PLACE
City-State-Zip: OLDSMAR FL 34677 City-State-Zip: OCALA FL 34480

Title IMMEDIATE PAST PRESIDENT Title PRESIDENT-ELECT

Name COCA, CPCS , DEBORAH Name WILLIAMS, CPCS, CPMSM, KIM

Address 13014 PRESTWICK DRIVE Address 1004 JUDITH AVE

City-State-Zip: RIVERVIEW FL 33579 City-State-Zip: NICEVILLE FL 32542

Title SECRETARY Title MEMBERSHIP CHAIR

Name ELORRIAGA, CPCS, CPMSM, Name ROHN, CPCS, CPMSM, KARA

CHRISTINA Address

Address 702 E. HILLCREST ST. City-State-Zip: MINNEOLA FL 34715

City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title WEBSITE LIAISON WEBSITE LIAISON WEBSITE DATE:

Name KRESSLER, CPCS, COLLEEN
Name CHIANG, COREY

Address 2399 HAWTHORNE DR. Address 5174 BODEGA DRIVE

City-State-Zip: MILTON FL 32583

City-State-Zip: CLEARWATER FL 33763

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: LISA BROOKS, CPCS, CPMSM

TREASURER

643 WOODS LANDING DR.

04/07/2024