

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23365

Entity Name: SOUTH FLORIDA SOCIETY FOR VASCULAR SURGERY, INC.

Current Principal Place of Business:

400 CAPITAL CIRCLE,SE
SUITE 1837
TALLAHASSEE, FL 32301

Current Mailing Address:

400 CAPITAL CIRCLE,SE
SUITE 1837
TALLAHASSEE, FL 32301 US

FEI Number: 65-0015415

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA & CARLSON CPA, PA
999 VANDERBILT BEACH RD
SUITE 511
NAPLES, FL 34108 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: EVELYN GARCIA

04/28/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EXECUTIVE DIRECTOR
Name RAJASINGHE, HIRANYA
Address 2350 VANDERBILT BEACH RD
SUITE 303
City-State-Zip: NAPLES FL 34109

Title PRES
Name CHAHWAN, SANTIAGO MD
Address 2350 VANDERBILT BEACH RD
SUITE 303
City-State-Zip: NAPLES FL 34109

Title SEC
Name INDART, MARLEN
Address 2350 VANDERBILT BEACH RD
SUITE 303
City-State-Zip: NAPLES FL 34109

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: HIRANYA RAJASINGHE

EXECUTIVE DIR

04/28/2020

Electronic Signature of Signing Officer/Director Detail

Date