2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26889

Entity Name: BROWARD COUNTY MEDICAL ASSOCIATION, INC.

FILED
Apr 28, 2022
Secretary of State
6335359383CC

Current Principal Place of Business:

5101 NW 21 AVE

S-510

FT. LAUDERDALE, FL 33309

Current Mailing Address:

5101 NW 21 AVE

S-510

FT. LAUDERDALE, FL 33309 US

FEI Number: 59-0834012 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CYNTHIA PETERSON 5101 NW 21 AVENUE SUITE S-510

FT. LAUDERDALE, FL 33309 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	DIRECTOR	Title	DIRECTOR

Name FATTEH, SHAHNAZ M.D. Name ZAGHA, RALPH M.D.

Address 5101 NW 21 AVE. SUITE 510 Address 5101 NW 21 AVE, SUITE 510

City-State-Zip: FT. LAUDERDALE FL 33309 City-State-Zip: FT. LAUDERDALE FL 33309

Title D Title PRESIDENT

NameCHANDRAN, KUTTY M.D.NameFERNANDEZ, VANIA E. M.D.Address5101 NW 21 AVE., SUITE 510Address5101 NW 21 AVE., SUITE 510City-State-Zip:FT. LAUDERDALE FL 33309City-State-Zip:FT. LAUDERDALE FL 33309

TitleDIRECTORTitlePRESIDENT ELECTNameKENIGSBERG, DAVID M.D.NameWONG, ANTONIO M.D.Address5101 NW 21ST AVE. SUITE 510Address5101 NW 21ST AVENUE

SUITE510

City-State-Zip: FT. LAUDERDALE FL 33309 City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR Title VP

Name BERENS, ABRAM S MD Name CHEANVECHIA, VASANA M.D.

Address 5101 NW 21ST AVENUE 64045000 5101 NW 21ST AVENUE

SUITE 510

Address 5101 NW 21ST AVENUE

SUITE 510

City-State-Zip: FORT LAUDERDALE FL 33309 City-State-Zip: FORT LAUDERDALE FL 33309

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: VANIA E. FERNANDEZ, M.D.

PRESIDENT

04/28/2022