2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005780

Entity Name: FLORIDA SOCIETY OF INTERVENTIONAL PAIN PHYSICIANS,

INC.

CICIANO

Jan 29, 2019 Secretary of State 8022761167CC

FILED

Current Principal Place of Business:

11319 CORTEZ BLVD BROOKSVILLE, FL 34613

Current Mailing Address:

3788 WINNING STAKES WAY MASON, OH 45040 US

FEI Number: 04-3722319 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRACY, DEBORAH H DR. 11319 CORTEZ BLVD BROOKSVILLE, FL 34613 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: DEBORAH H TRACY 01/29/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR AT LARGE Title PRESIDENT

Name SILVERMAN, SANFORD M DR. Name LIPNICK, JESSE A DR.

Address 100 E SAMPLE ROAD Address 1315 NW 21ST AVENUE

200

City-State-Zip: POMPANO BEACH FL 33064 City-State-Zip: CHIEFLAND FL 32626

Title IMMEDIATE PAST PRESIDENT Title T

Name FLORETE, ORLANDO V MD Name DAITCH, JONATHAN M.D.

Address 820 PRUDENTIAL DRIVE Address 8255 COLLEGE PARKWAY 111 200

City-State-Zip: JACKSONVILLE FL 32207 City-State-Zip: FT MYERS FL 33919

Title SECRETARY Title EXECUTIVE DIRECTOR

Name TRACY, DEBORAH DR. Name BYERS, MICHELLE

Address 11319 CORTEZ BLVD Address 3788 WINNING STAKES WAY

City-State-Zip: BROOKSVILLE FL 34613 City-State-Zip: MASON OH 45040

TitleVICE PRESIDENTTitleDIRECTOR AT LARGENameDE LA GARZA, MIGUEL DR.NameTRESCOTT, ANDREA PHDAddress5413 GEORGE STREETAddress4 OCEANSIDE CIRCLE

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: ST AUGUSTINE FL 32080

Continues on page 2

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: JESSE LIPNICK PRESIDENT 01/29/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR AT LARGE
Name CORDNER, HAROLD J DR.
Address 13835 US HIGHWAY 1

City-State-Zip: SEBASTIAN FL 32958

Name PAEZ, JULIO DR.

Title

Address 3788 WINNING STAKES WAY

DIRECTOR-AT-LARGE

City-State-Zip: MASON OH 45040

Title DIRECTOR-AT-LARGW

Name STIECHEN, DO, CARRIE

Address 3788 WINNING STAKES WAY

City-State-Zip: MASON OH 45040

Title DIRECTOR AT LARGE
Name BHALANI, MAULIK DR.
Address 2553 WINDGUARD CIRCLE
City-State-Zip: WESLEY CHAPEL FL 33544

Title DIRECTOR-AT-LARGE

Name PRZKORA, MD, PHD, RENE Address 3788 WINNING STAKES WAY

City-State-Zip: MASON OH 45040