

2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005780

FILED
Jan 03, 2018
Secretary of State
CC0095175715

Entity Name: FLORIDA SOCIETY OF INTERVENTIONAL PAIN PHYSICIANS, INC.

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

01/03/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR AT LARGE
Name SILVERMAN, SANFORD M DR.
Address 100 E SAMPLE ROAD
200
City-State-Zip: POMPANO BEACH FL 33064

Title IMMEDIATE PAST PRESIDENT
Name DALTON, HAROLD L DR.
Address 6000 N FEDERAL HIGHWAY
City-State-Zip: FT LAUDERDALE FL 33308

Title PRESIDENT ELECT
Name LIPNICK, JESSE A DR.
Address 1315 NW 21ST AVENUE
1
City-State-Zip: CHIEFLAND FL 32626

Title PRESIDENT
Name FLORETE, ORLANDO V MD
Address 820 PRUDENTIAL DRIVE
111
City-State-Zip: JACKSONVILLE FL 32207

Title T
Name DAITCH, JONATHAN M.D.
Address 8255 COLLEGE PARKWAY
200
City-State-Zip: FT MYERS FL 33919

Title SECRETARY
Name TRACY, DEBORAH DR.
Address 11319 CORTEZ BLVD
City-State-Zip: BROOKSVILLE FL 34613

Title EXECUTIVE DIRECTOR
Name BYERS, MICHELLE
Address 3788 WINNING STAKES WAY
City-State-Zip: MASON OH 45040

Title VICE PRESIDENT
Name DE LA GARZA, MIGUEL DR.
Address 5413 GEORGE STREET
City-State-Zip: NEW PORT RICHEY FL 34652

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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: MICHELLE BYERS

EXECUTIVE DIRECTOR

01/03/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR AT LARGE
Name MIGUEL, RAFAEL DR.
Address 514 EICHENFELD DRIVE
202
City-State-Zip: BRANDON FL 33511

Title DIRECTOR AT LARGE
Name CORDNER, HAROLD J DR.
Address 13835 US HIGHWAY 1
City-State-Zip: SEBASTIAN FL 32958

Title DIRECTOR-AT-LARGE
Name PAEZ, JULIO DR.
Address 3788 WINNING STAKES WAY
City-State-Zip: MASON OH 45040

Title DIRECTOR AT LARGE
Name TRESMOTT, ANDREA PHD
Address 4 OCEANSIDE CIRCLE
City-State-Zip: ST AUGUSTINE FL 32080

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

Title DIRECTOR-AT-LARGE
Name ARCOS, GEORGE DR.
Address 4624 N DAVIS HIGHWAY
City-State-Zip: PENSACOLA FL 32503