

2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 03, 2017
Secretary of State
CC1650652452

Entity Name: NATIONAL CERTIFICATION COMMISSION FOR ACUPUNCTURE AND ORIENTAL MEDICINE, INC.

Current Principal Place of Business:

76 S. LAURA ST
1290
JACKSONVILLE, FL 32202

Current Mailing Address:

76 S. LAURA ST
1290
JACKSONVILLE, FL 32202

FEI Number: 11-2760706

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 TREASURER
Name KAZMIERCZAK, STEVEN
Address OREGON HEALTH & SCIENCE UNIV
 3181 S.W. SAM JACKSON PARK RD
City-State-Zip: PORTLAND OR 97239

Title CEO
Name WARD-COOK, KORY
Address 1401 RIVERPLACE BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title CHAIR
Name BROMLEY, FRANCES AFUA
Address 8748 BIG BEND BLVD.
City-State-Zip: ST. LOUIS MO 63119

Title VICE CHAIR
Name LONDON, EUGENE
Address 2261 MARKET STREET
 SUITE 201
City-State-Zip: SAN FRANCISCO CA 94114-1600

Title SECRETARY
Name JEW, CARL
Address 172 COBBLESTONE DR
City-State-Zip: SAN RAFAEL CA 94903

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: KORY WARD-COOK

CEO

04/03/2017

Electronic Signature of Signing Officer/Director Detail

Date