

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713038

FILED
Mar 24, 2008
Secretary of State

Entity Name: THE FLORIDA MEDICAL ASSOCIATION ALLIANCE, INC.

Current Principal Place of Business:

113 COLLEGE AVENUE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

123 S ADAMS STREET
TALLAHASSEE, FL 32301 US

Current Mailing Address:

PO BOX 10269
TALLAHASSEE, FL 32302 US

New Mailing Address:

FEI Number: 59-6149397 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORTHAM, SANDRA B
13 COLLEGE AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

SCOTT, KIMBERLY S VP
123 S ADAMS ST
TALLAHASSEE, FL 32301 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: KIMBERLY S SCOTT

03/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: ARAIN, PAMELA
Address: 120 HICKORY CREEK BLVD
City-St-Zip: BRANDON, FL 33511

Title: VD () Delete
Name: ANDREWS, DIANE
Address: 1821 ALAQUA DRIVE
City-St-Zip: ORLANDO, FL 32779

Title: PD () Delete
Name: XAVIER, ROSEMARY
Address: 748 LAKESIDE DRIVE
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: PED () Delete
Name: HALE, ELAINE
Address: 1136 GATLIN AVEUE
City-St-Zip: ORLANDO, FL 32806

Title: EVP () Delete
Name: MORTHAM, SANDRA
Address: 123 SOUTH ADAMS STREET
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HALE, ELAINE
Address: 1136 GATLIN AVENUE
City-St-Zip: ORLANDO, FL 32806

Title: VP (X) Change () Addition
Name: ANDERSON, ANN
Address: 5124 INAGUA WAY
City-St-Zip: NAPLES, FL 34119

Title: S (X) Change () Addition
Name: DONOVAN, SUSAN
Address: 7690 SMULLIAN TRAIL WEST
City-St-Zip: JACKSONVILLE, FL 32217

Title: T (X) Change () Addition
Name: BATTAGLIA, LISA
Address: 1210 N VIEW DRIVE
City-St-Zip: SARASOTA, FL 34242

Title: VP (X) Change () Addition
Name: SCOTT, KIMBERLY S VP
Address: 123 SOUTH ADAMS STREET
City-St-Zip: TALLAHASSEE, FL 32301

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KIMBERLY S SCOTT

VP

03/24/2008

Electronic Signature of Signing Officer or Director

Date