2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2010
Secretary of State

DOCUMENT# 722806

Entity Name: FLORIDA PODIATRIC MEDICAL ASSOCIATION, INC.

Current Principal Place of Business:

410 NORTH GADSDEN
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

410 NORTH GADSDEN
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-1235979 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANSEN, WENDY
9670 DEER VALLEY DRIVE
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: 2VP
Name: VAKIL, SAMIR S DPM
Address: 401-B E. OLYMPIA AVENUE
City-St-Zip: PUNTA GORDA, FL 33950

Title: 1VP
Name: IANNACONE, ROBERT A DPM
Address: 691 SW PORT ST. LUCIE BLVD
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: TD
Name: BAKER, JOHN E DPM
Address: 6317 SEALAWN DRIVE
City-St-Zip: SPRING HILL, FL 34607

Title: PPD
Name: HAVES, BRADLEY C DPM
Address: 5840 WEST FLAGLER STREET #3
City-St-Zip: MIAMI, FL 33144

Title: SD
Name: NOLL, MARIA G DPM
Address: 10621 AIRPORT PULLING ROAD #4
City-St-Zip: NAPLES, FL 34109

Title: PD
Name: MCDONALD, TERENCE D
Address: 6405 N. FEDERAL HIGHWAY #405
City-St-Zip: FORT LAUDERDALE, FL 33026

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: TERENCE D. MCDONALD PD 01/25/2010

Electronic Signature of Signing Officer or Director Date