

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744617

FILED  
Jan 10, 2012  
Secretary of State

**Entity Name:** UNIVERSITY OF FLORIDA JACKSONVILLE PHYSICIANS, INC.

**Current Principal Place of Business:**

653 W. 8TH ST.  
JACKSONVILLE, FL 32209

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 44008  
JACKSONVILLE, FL 322314008

**New Mailing Address:**

**FEI Number:** 59-1867557

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FRASHUER, NANCY D  
653 WEST 8TH ST.  
JACKSONVILLE, FL 32209 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: P  
Name: BENRUBI, GUY MD  
Address: 653 W. 8TH ST.  
City-St-Zip: JACKSONVILLE, FL 32209

Title: VPD  
Name: BERGER, ALAN MD  
Address: 653 W. 8TH ST.  
City-St-Zip: JACKSONVILLE, FL 32209

Title: S  
Name: BASS, THEODORE M.D.  
Address: 653 W 8TH ST.  
City-St-Zip: JACKSONVILLE, FL 32209

Title: TD  
Name: MOORADIAN, ARSHAG  
Address: 653 W 8TH STREET  
City-St-Zip: JACKSONVILLE, FL 32209

Title: CEO  
Name: FRASHUER, NANCY D  
Address: 653 WEST 8TH ST  
City-St-Zip: JACKSONVILLE, FL 32209

Title: C  
Name: NUSS, ROBERT C MD  
Address: 653 W. 8TH ST.  
City-St-Zip: JACKSONVILLE, FL 32209

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: NANCY D. FRASHUER

CEO

01/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date