2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2010
Secretary of State

DOCUMENT# 750432

Entity Name: THE LEE COUNTY MEDICAL SOCIETY, INC.

Current Principal Place of Business:

3805 FOWLER STREET
SUITE 2
FT MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 60041
FT MYERS, FL 339060041 US

New Mailing Address:

FEI Number: 23-7026263 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILKE, ANN
3805 FOWLER STREET SUITE 2
FORT MYERS, FL 33901 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: SWEET, CRAIG R MD
Address: 12611 WORLD PLAZA LANE #53
City-St-Zip: FORT MYERS, FL 33907

Title: DPP
Name: HOBBS, LARRY MD
Address: 2727 WINKLER AVE
City-St-Zip: FORT MYERS, FL 33901

Title: S
Name: RICHARD, MACCHIAROLI MD
Address: 9981 S HEALTHPARK CIRCLE
City-St-Zip: FORT MYERS, FL 33908

Title: VP
Name: SULTAN, SHAHID MD
Address: 9981 HEALTHPARK CIR SUITE 281
City-St-Zip: FORT MYERS, FL 33908

Title: T
Name: FARAHMAND, AUDREY MD
Address: 13710 METROPOLIS AVENUE STE 104
City-St-Zip: FORT MYERS, FL 33912

Title: D
Name: HENRICKS, DOUGLAS MD
Address: 6311 SOUTH POINTE BLVD
City-St-Zip: FORT MYERS, FL 33919

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: CRAIG SWEET, MD P 01/19/2010

Electronic Signature of Signing Officer or Director Date