2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#751310

FILED Apr 30, 2009 Secretary of State

Entity Name: FLORIDA SOCIETY OF THE AMERICAN COLLEGE OF OSTEOPATHIC FAMILY PHYSICIANS, INC.

Current Principal Place of Business: New Principal Place of Business:

2563 CAPITAL MEDICAL BLVD TALLAHASSEE, FL 32308 US

Current Mailing Address: New Mailing Address:

2563 CAPITAL MEDICAL BLVD TALLAHASSEE, FL 32308 US

FEI Number: 59-2013158 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BODKIN, LARRY E JR 2563 CAPITAL MEDICAL BLVD TALLAHASSEE, FL 32308 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PP () Delete

 Name:
 DE GAETANO, JOSEPH S DO

 Address:
 3200 S. UNIVERSITY DRIVE

 City-St-Zip:
 FT. LAUDERDALE, FL 33328

 Title:
 P
 () Delete

 Name:
 SHUCK, RANDY A DO

 Address:
 7655 38TH AVENUE NORTH

 City-St-Zip:
 ST. PETERSBURG, FL 33710

 Title:
 VP
 () Delete

 Name:
 CIMERBERG, STEVEN W DO

 Address:
 10063 CLEARY BOULEVARD

 City-St-Zip:
 PLANTATION, FL 33324

 Title:
 S
 () Delete

 Name:
 CALZADA, PABLE DO

 Address:
 7755 NW 19TH COURT

 City-St-Zip:
 PEMBROOK PINES, FL 33024

Title: T () Delete
Name: ALLGEIER, JOSEPH D DO

Address: 7975 LAKE UNDERHILL RD. SUITE 210

City-St-Zip: ORLANDO, FL 32822

 Title:
 M
 () Delete

 Name:
 BODKIN, LARRY E JR.

 Address:
 2563 CAPITAL MEDICAL BLVD

 City-St-Zip:
 TALLAHASSEE, FL 32308

Title: PP (X) Change () Addition

Name: SHUCK, RANDY A DO
Address: 7655 38TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: P (X) Change () Addition
Name: STAGER, WILLIAM H DO
Address: 311 GOLF ROAD, SUITE 1100
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VP (X) Change () Addition Name: ALLGEIER, JOSEPH D DO

Address: 7975 LAKE UNDERHILL ROAD, SUITE 210

City-St-Zip: ORLANDO, FL 32822

 $\begin{array}{lll} \mbox{Title:} & \mbox{S} & \mbox{(X) Change () Addition} \\ \mbox{Name:} & \mbox{GROSS, ANDREW S DO} \\ \end{array}$

Address: 9555 SEMINOLE BLVD., #204 City-St-Zip: SEMINOLE, FL 33772

Title: T (X) Change () Addition

Name: CALZADA, PABLO DO Address: 3200 S. UNIVERSITY DRIVE

City-St-Zip: DAVIE, FL 33328

Title: D (X) Change () Addition

Name: BODKIN, LARRY E JR.
Address: 2563 CAPITAL MEDICAL BLVD
City-St-Zip: TALLAHASSEE, FL 32308

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: LARRY BODKIN D 04/30/2009