

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757196

FILED
Feb 18, 2010
Secretary of State

Entity Name: BOCA RATON MEDICAL ARTS CENTER, INC.

Current Principal Place of Business:

1651 NW 1ST COURT
BOCA RATON, FL 33432 US

New Principal Place of Business:

1651 NW 1ST COURT
BOCA RATON, FL 33432 US

Current Mailing Address:

1651 NW 1ST COURT
BOCA RATON, FL 33432 US

New Mailing Address:

1651 NW 1ST COURT
BOCA RATON, FL 33432 US

FEI Number: 59-2115176

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEXLER, JERRY R.
951 NW 13TH STREET
BOCA RATON, FL 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: PD
Name: ECKELSON, ROBERT
Address: 951 NW 13TH ST, SUITE 3B
City-St-Zip: BOCA RATON, FL

Title: DTS
Name: WEXLER, JERRY
Address: 951 NW 13TH ST, SUITE 5C
City-St-Zip: BOCA RATON, FL

Title: D
Name: ISAACSON, STUART
Address: 951 NW 13TH STREET; SUITE 5E
City-St-Zip: BOCA RATON, FL 33486

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: ROBERT ECKELSON

PD

02/18/2010

Electronic Signature of Signing Officer or Director

Date