

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001409

FILED  
Mar 23, 2010  
Secretary of State

**Entity Name:** AMERICAN SOCIETY OF COSMETIC DERMATOLOGY AND AESTHETIC SURGERY, INC.

**Current Principal Place of Business:**

2563 CAPITAL MEDICAL BLVD.  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

1876-B EIDER COURT  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

2563 CAPITAL MEDICAL BLVD.  
TALLAHASSEE, FL 32308

**New Mailing Address:**

1876-B EIDER COURT  
TALLAHASSEE, FL 32308

**FEI Number:** 31-1806497

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

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

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

BODKIN, LARRY E JR.  
1876-B EIDER COURT  
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: LARRY E. BODKIN, JR.

03/23/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BODKIN, LARRY E. JR.  
Address: 1876-B EIDER COURT  
City-St-Zip: TALLAHASSEE, FL 32308

Title: P  
Name: SPENCER, JAMES M MD  
Address: 900 CARILLON PARKWAY, SUITE 404  
City-St-Zip: ST. PETERSBURG, FL 33716

Title: VP  
Name: DUFFY, DAVID M MD  
Address: 4201 TORRANCE BLVD., SUITE 710  
City-St-Zip: TORRANCE, CA 90503

Title: T  
Name: ROTUNDA, ADAM M MD  
Address: 1401 AVOCADO AVENUE, SUITE 810  
City-St-Zip: NEWPORT BEACH, CA 92660

Title: S  
Name: KAUVAR, ARIELLE N MD  
Address: 1044 FIFTH AVENUE  
City-St-Zip: NEW YORK, NY 10028

Title: PE  
Name: MARMUR, ELLEN S MD  
Address: 5 EAST 98TH STREET, 5TH FLOOR, BOX 1048  
City-St-Zip: NEW YORK, NY 10029

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: LARRY E. BODKIN, JR.

D

03/23/2010

Electronic Signature of Signing Officer or Director

Date