

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005096

FILED
Jan 16, 2009
Secretary of State

Entity Name: FLORIDA PERFUSION SOCIETY, INC.

Current Principal Place of Business:

8225 SW 176 TERRACE
VILLAGE OF PALMETTO BAY, FL 33157

New Principal Place of Business:

17080 SAFETY ST., SUITE 108
FORT MYERS, FL 33908

Current Mailing Address:

8225 SW 176 TERRACE
VILLAGE OF PALMETTO BAY, FL 33157

New Mailing Address:

17080 SAFETY ST., SUITE 108
FORT MYERS, FL 33908

FEI Number: 65-1118647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVEN, MCELROY
8225 SW 176 TERRACE
VILLAGE OF PALMETTO BAY, FL 33157 US

Name and Address of New Registered Agent:

BRYAN, LICH
17080 SAFETY ST., SUITE 108
FORT MYERS, FL 33908 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: BRYAN V. LICH

01/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T (X) Delete
Name: MCELROY, STEVEN
Address: 8225 SW 176 TERRACE
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157

Title: D () Delete
Name: KALSHOVEN, DIXIE
Address: 11427 BOYETTE ROAD
City-St-Zip: RIVERVIEW, FL 33569

Title: PRES () Delete
Name: WALKER, TY
Address: 3256 ELCANO LANE
City-St-Zip: CANTONMENT, FL 32533

Title: DIR () Delete
Name: LICH, BRYAN
Address: 17080 SAFETY STREET
City-St-Zip: FT. MYERS, FL 33908

Title: S () Delete
Name: ZUCK, PETER
Address: 15266 BRIARCREST CIRCLE
City-St-Zip: FT. MYERS, FL 33912

Title: D () Delete
Name: WONG, DANNY
Address: 2621 SW 180TH AVE
City-St-Zip: MIRAMAR, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: LICH, BRYAN
Address: 17080 SAFETY STREET
City-St-Zip: FT. MYERS, FL 33908

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRYAN V. LICH

TRES

01/16/2009

Electronic Signature of Signing Officer or Director

Date