

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005096

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** FLORIDA PERFUSION SOCIETY, INC.

**Current Principal Place of Business:**

17080 SAFETY ST., SUITE 109  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

17080 SAFETY ST., SUITE 109  
FORT MYERS, FL 33908

**New Mailing Address:**

**FEI Number:** 65-1118647

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRYAN, LICH  
17080 SAFETY ST., SUITE 108  
FORT MYERS, FL 33908 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:** PRES  
**Name:** MARTIN, MARK LICH  
**Address:** 3846 SW 105 STREET  
**City-St-Zip:** GAINESVILLE, FL 33908

**Title:** T  
**Name:** LICH, BRYAN  
**Address:** 17080 SAFETY STREET  
**City-St-Zip:** FT. MYERS, FL 33908

**Title:** D  
**Name:** SEAN, MURTHA  
**Address:** 1849 MARINERS LANE  
**City-St-Zip:** WESTON, FL 33327

**Title:** VP  
**Name:** PACHECO, SCOTT  
**Address:** 5601 HAWKâ€™S BLUFF AVE.  
**City-St-Zip:** DAVIE, FL 33331

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:** BRYAN V. LICH

TRES

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date