2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2009
Secretary of State

DOCUMENT# N02000003201

Entity Name: MID-ATLANTIC CHAPTER OF THE AMERICAN ASSOCIATION OF CLINICAL ENDOCRINOLOGISTS, INC.

Current Principal Place of Business:

245 RIVERSIDE AVE
SUITE 200
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

245 RIVERSIDE AVE
SUITE 200
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 11-3642514 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, DONALD C
245 RIVERSIDE AVE SUITE 200
JACKSONVILLE, FL 32202 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 ( ) Delete
Name: BALOGNESE, MICHAEL A
Address: 10215 FERNWOOD RD STE 40
City-St-Zip: BETHESDA, MD 208171183

Title: VD ( ) Delete
Name: DEMPSEY, MICHAEL
Address: 3200 TOWER OAKS BLVD. SUITE 250
City-St-Zip: ROCKVILLE, MD 20852

Title: SD ( ) Delete
Name: DEMPSEY, MICHAEL A MD
Address: 15001 SHADY GROVE RD., #320
City-St-Zip: ROCKVILLE, MD 20850

Title: TD ( ) Delete
Name: MOHAMED, SHAKIR K. M.
Address: 9905 MARQUETTE DR.
City-St-Zip: BETHESDA, MD 208171749 US

Title: 1PPD ( ) Delete
Name: SAFA, ALI M
Address: 301 MAPLE AVE WEST, SUITE 3-A
City-St-Zip: VIENNA, VA 221804301

Title: M ( ) Delete
Name: JONES, DONALD C
Address: 245 RIVERSIDE AVE #200
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BOLOGNESE, MICHAEL A MD
Address: 10215 FERNWOOD RD STE 40
City-St-Zip: BETHESDA, MD 208171183 US

Title: VP (X) Change ( ) Addition
Name: DEMPSEY, MICHAEL MD
Address: 3200 TOWER OAKS BLVD. SUITE 250
City-St-Zip: ROCKVILLE, MD 20852 US

Title: D (X) Change ( ) Addition
Name: IRWIG, MICHAEL S MD
Address: 2150 PENNSYLVANIA AVE NW STE 3-416
City-St-Zip: WASHINGTON, DC 20037 US

Title: T (X) Change ( ) Addition
Name: SHAKIR, MOHAMED K M
Address: 8901 WISCONSIN AVE
City-St-Zip: BETHESDA, MD 20889 US

Title: D (X) Change ( ) Addition
Name: BELLATONI, MARIE MD
Address: 9105 FRANKLIN SQUARE DRIVE STE 313
City-St-Zip: BALTIMORE, MD 21237 US

Title: MGR (X) Change ( ) Addition
Name: JONES, DONALD C
Address: 245 RIVERSIDE AVE #200
City-St-Zip: JACKSONVILLE, FL 32202 US

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: DONALD C. JONES MGR 04/02/2009

Electronic Signature of Signing Officer or Director — Date