

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008842

FILED
Apr 08, 2009
Secretary of State

Entity Name: ARIZONA 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:

245 RIVERSIDE AVE
SUITE 200
JACKSONVILLE, FL 32202 US

Current Mailing Address:

245 RIVERSIDE AVE
SUITE 200
JACKSONVILLE, FL 32202

New Mailing Address:

245 RIVERSIDE AVE
SUITE 200
JACKSONVILLE, FL 32202 US

FEI Number: 75-3094329

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: PPD () Delete
Name: LEVY, PHILIP MD
Address: 1300 N 12TH ST SUITE 600
City-St-Zip: PHOENIX, AZ 850062850

Title: VD () Delete
Name: DUICK, DANIEL MD
Address: 3522 N 3RD AVE
City-St-Zip: PHOENIX, AZ 850133903

Title: M () Delete
Name: JONES, DONALD C
Address: 245 RIVERSIDE AVENUE, SUITE 200
City-St-Zip: JACKSONVILLE, FL 322024933 US

Title: PD () Delete
Name: VERSO, ANTONIO M MD
Address: 1300 N 12TH ST SUITE 600
City-St-Zip: PHOENIX, AZ 850062850

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEVY, PHILIP MD
Address: 1300 N 12TH ST SUITE 600
City-St-Zip: PHOENIX, AZ 850062850 US

Title: D (X) Change () Addition
Name: INSEL, JONATHAN R MD
Address: 6369 EAST TANQUE VERDE ROAD #150
City-St-Zip: TUSCON, AZ 85715 US

Title: MGR (X) Change () Addition
Name: JONES, DONALD C
Address: 245 RIVERSIDE AVENUE, SUITE 200
City-St-Zip: JACKSONVILLE, FL 322024933 US

Title: PD (X) Change () Addition
Name: VERSO, M. A MD
Address: 1300 N 12TH ST SUITE 600
City-St-Zip: PHOENIX, AZ 850062850 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

04/08/2009

Electronic Signature of Signing Officer or Director

Date