

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000920

FILED
Apr 19, 2010
Secretary of State

Entity Name: NATIONAL ARAB AMERICAN MEDICAL ASSOCIATION-CENTRAL FLORIDA CHAPTER, INC.

Current Principal Place of Business:

10000 W HWY 50
SUITE #285
OCOOE, FL 34761

New Principal Place of Business:

8761 THE ESPLANADE
UNIT#24
ORLANDO, FL 32836

Current Mailing Address:

10000 W HWY 50
SUITE#285
OCOOE, FL 34761

New Mailing Address:

8761 THE ESPLANADE
UNIT#24
ORLANDO, FL 32836

FEI Number: 54-2096609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILWA, NABIL MD
10000 W HWY 50
SUITE #285
OCOOE, FL 34761 US

Name and Address of New Registered Agent:

HILWA, NABIL MD
8761 THE ESPLANADE
UNIT#24
ORLANDO, FL 32836 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:

04/19/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: RAOUL, HILAL DR.
Address: 1101 N MAITLAND AVE
City-St-Zip: MAITLAND, FL 32752

Title: T
Name: HILWA, NABIL MD
Address: 8761 THE ESPLANADE #24
City-St-Zip: ORLANDO, FL 32836

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: NABIL HILWA

T

04/19/2010

Electronic Signature of Signing Officer or Director

Date