

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03828

FILED
Apr 28, 2009
Secretary of State

Entity Name: SHANDS JACKSONVILLE HEALTHCARE, INC.

Current Principal Place of Business:

655 WEST 8TH STREET
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

ATTN: CHARLES E. CANIFF, ESQ.
655 WEST 8TH STREET
JACKSONVILLE, FL 32209

New Mailing Address:

655 WEST 8TH STREET
JACKSONVILLE, FL 32209

FEI Number: 59-2441966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANIFF, CHARLES E ESQ.
655 WEST 8TH STREET
JACKSONVILLE, FL 32209 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: CD () Delete
Name: GOLDFARB, TIMOTHY M
Address: POB 100326
City-St-Zip: GAINESVILLE, FL 326100326

Title: PD () Delete
Name: BURKHART, JAMES R
Address: 655 W 8TH ST
City-St-Zip: JACKSONVILLE, FL 32209

Title: T () Delete
Name: RYAN, WILLIAM J
Address: 655 W 8TH ST
City-St-Zip: JACKSONVILLE, FL 32209

Title: S () Delete
Name: CANIFF, CHARLES E ESQ
Address: 655 W 8TH ST
City-St-Zip: JACKSONVILLE, FL 32209

Title: D () Delete
Name: DANFORD JR, RICHARD PHD
Address: 655 W. 8TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: D () Delete
Name: MAGEE, SAMPLE J MD
Address: 655 W 8TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

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

Title: D (X) Change () Addition
Name: MANSFIELD, JODI
Address: P.O. BOX 100326
City-St-Zip: GAINESVILLE, FL 32610

Title: D (X) Change () Addition
Name: NUSS, ROBERT C MD
Address: 653 WEST EIGHTH STREET
City-St-Zip: JACKSONVILLE, FL 32209

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: CHARLES E. CANIFF

S

04/28/2009

Electronic Signature of Signing Officer or Director

Date

N03828

4-28-09

ATTACHMENT
2009 Annual Report

DOCUMENT #N03828
Reference/Tracking Number 600153247046
SHANDS JACKSONVILLE HEALTHCARE, INC.
Additional Directors

D
DANSFORD, JR., Ph.D., RICHARD
655 WEST EIGHTH STREET
JACKSONVILLE, FL 32209

D
MAGEE, MD, SAMPLE J.
655 WEST EIGHTH STREET
JACKSONVILLE, FL 32209

D
O'STEEN, HAROLD S.
759 EDGEWOOD AVENUE NORTH
JACKSONVILLE, FL 32205

D
PAUL, PAMELA Y.
963 PONTE VEDRA BLVD.
PONTE VEDRA BCH, FL 32082

D
SPATES, L. JEROME
555 WEST ELEVENTH STREET
JACKSONVILLE, FL 32209

D
VUKICH, MD, DAVID
655 WEST EIGHTH STREET
JACKSONVILLE, FL 32209