## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000009932

FILED Apr 05, 2010 Secretary of State

Entity Name: NORTH FLORIDA CARDIOVASCULAR EDUCATION FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

501 RIVERSIDE AVE STE 800 JACKSONVILLE, FL 32202

Current Mailing Address: New Mailing Address:

501 RIVERSIDE AVE STE 800 JACKSONVILLE, FL 32202

FEI Number: 20-1773470 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LBA CERTIFIED PUBLIC ACCOUNTANTS, P.A. 501 RIVERSIDE AVE STE 800 JACKSONVILLE, FL 32202 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: D

Name: CAMPBELL, JAMES M.D.

Address: 3599 UNIVERSITY BLVD., SUITE 1106

City-St-Zip: JACKSONVILLE, FL 32216

Title: D

Name: SCHRANK, JOEL M.D.

Address: 836 PRUDENTIAL DRIVE, SUITE 1700

City-St-Zip: JACKSONVILLE, FL 32207

Title: D

Name: SEALS, A. ALLEN M.D.

Address: 3550 UNIVERSITY BLVD., SUITE 302

City-St-Zip: JACKSONVILLE, FL 32216

Title: D

Name: PILCHER, GEORGE M.D.
Address: 1800 BARRS STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title:

Name: WOLFORD, THOMAS M.D.

Address: 3599 UNIVERSITY BLVD. S. SUITE 1106

City-St-Zip: JACKSONVILLE, FL 32216

Title:

Name: GREENE, TREVOR M.D.

Address: 3550 UNIVERSITY BLVD. S. SUITE 302

City-St-Zip: JACKSONVILLE, FL 32216

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: ALLEN A. SEALS, MD DIR 04/05/2010