

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007836

FILED
Mar 23, 2011
Secretary of State

Entity Name: CERTIFICATION BOARD OF NUCLEAR ENDOCRINOLOGY, INC.

Current Principal Place of Business:

245 RIVERSIDE AVE.
SUITE 200
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

Current Mailing Address:

245 RIVERSIDE AVE.
SUITE 200
JACKSONVILLE, FL 32202 US

New Mailing Address:

FEI Number: 20-3244540

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: D
Name: BASKIN, H. J MD
Address: 1741 BARCELONA WAY
City-St-Zip: WINTER PARK, FL 32789 US

Title: C
Name: ORZECK, ERIC A MD
Address: 10023 SOUTH MAIN STREET C-4
City-St-Zip: HOUSTON, TX 77025 US

Title: D
Name: SISTRUNK, J W MD
Address: 971 LAKELAND DRIVE SUITE 353
City-St-Zip: JACKSON, MS 39216 US

Title: MGR
Name: JONES, DONALD C
Address: 245 RIVERSIDE AVENUE SUITE 200
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: D
Name: HAMILTON, CARLOS R MD
Address: 7000 FANNIN STREET SUITE 1535
City-St-Zip: HOUSTON, TX 77030 US

Title: D
Name: LUPO, MARK A MD
Address: 5741 BEE RIDGE ROAD SUITE 500
City-St-Zip: SARASOTA, FL 34233 US

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: DONALD C. JONES

CEO

03/23/2011

Electronic Signature of Signing Officer or Director

Date