

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 01, 2011
Secretary of State

Entity Name: THE BICOL CLINIC FOUNDATION, INC.

Current Principal Place of Business:

951 NW 13TH STREET
3E
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

951 NW 13TH STREET
3E
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: 14-1948962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: CEO
Name: SCHUSTER, JOSHUA
Address: 184 THOMPSON ST. # MD
City-St-Zip: NEW YORK, NY 10012

Title: SECT
Name: BERNSTEIN, BOBBI J MS
Address: 23247 BARWOOD LN. N. #201
City-St-Zip: BOCA RATON, FL 33428

Title: VP
Name: FISHELSON, JAMES
Address: 951 NW 13TH STREET SUITE 3E
City-St-Zip: BOCA RATON, FL 33486

Title: MD
Name: SCHUSTER, MITCHELL A
Address: 951 NW 13TH STREET SUITE 3E
City-St-Zip: BOCA RATON, FL 33486

Title: TREA
Name: RIFKIN, ERIC
Address: 951 NW 13TH STREET SUITE 3E
City-St-Zip: BOCA RATON, FL 33486

Title: VP
Name: BROCHYUS, CHRISTOPHER
Address: 951 NW 13TH STREET SUITE 3E
City-St-Zip: BOCA RATON, FL 33486

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: BOBBI JO BERNSTEIN

SEC.

04/01/2011

Electronic Signature of Signing Officer or Director

Date