

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012729

FILED  
Apr 01, 2009  
Secretary of State

Entity Name: ACADEMY OF CLINICAL THYROIDOLOGISTS, INC.

## Current Principal Place of Business:

245 RIVERSIDE AVENUE  
SUITE 200  
JACKSONVILLE, FL 32202

## New Principal Place of Business:

245 RIVERSIDE AVENUE  
SUITE 200  
JACKSONVILLE, FL 32202 US

## Current Mailing Address:

245 RIVERSIDE AVENUE  
SUITE 200  
JACKSONVILLE, FL 32202

## New Mailing Address:

245 RIVERSIDE AVENUE  
SUITE 200  
JACKSONVILLE, FL 32202 US

FEI Number: 20-8038505

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, DONALD C  
245 RIVERSIDE AVENUE  
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: SD ( ) Delete  
Name: GUTTLER, RICHARD MD  
Address: 245 RIVERSIDE AVE., SUITE 200  
City-St-Zip: JACKSONVILLE, FL 322024933

Title: D ( ) Delete  
Name: BASKIN, H. JACK MD  
Address: 1741 BARCELONA WAY  
City-St-Zip: WINTER PARK, FL 327895616

Title: D ( ) Delete  
Name: DUICK, DANIEL S MD  
Address: 245 RIVERSIDE AVE., SUITE 200  
City-St-Zip: JACKSONVILLE, FL 327894933

Title: M ( ) Delete  
Name: JONES, DONALD C  
Address: 245 RIVERSIDE AVE STE 200  
City-St-Zip: JACKSONVILLE, FL 322024933

Title: PD ( ) Delete  
Name: LUPO, MARK  
Address: 245 RIVERSIDE AVE., SUITE 200  
City-St-Zip: JACKSONVILLE, FL 322024933

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition  
Name: GUTTLER, RICHARD B MD  
Address: 1328 16TH STREET  
City-St-Zip: SANTA MONICA, CA 90404 US

Title: D (X) Change ( ) Addition  
Name: BASKIN, H. JACK MD  
Address: 1741 BARCELONA WAY  
City-St-Zip: WINTER PARK, FL 327895616 US

Title: D (X) Change ( ) Addition  
Name: DUICK, DANIEL S MD  
Address: 3522 N 3RD AVE  
City-St-Zip: PHOENIX, AZ 85013 US

Title: MGR (X) Change ( ) Addition  
Name: JONES, DONALD C  
Address: 245 RIVERSIDE AVE STE 200  
City-St-Zip: JACKSONVILLE, FL 322024933 US

Title: PD (X) Change ( ) Addition  
Name: LUPO, MARK  
Address: 5741 BEE RIDGE ROAD STE 500  
City-St-Zip: SARASOTA, FL 34233

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: DONALD C. JONES

MGR

04/01/2009

Electronic Signature of Signing Officer or Director

Date