

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000170

FILED
Jan 06, 2011
Secretary of State

Entity Name: FORT LAUDERDALE SURGICAL SOCIETY, INC.

Current Principal Place of Business:

500 W CYPRESS CREEK RD SUITE 210
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

500 W CYPRESS CREEK RD SUITE 210
FT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 20-8181299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOMLINSON, JOHN L
500 W CYPRESS CREEK RD SUITE 210
FT LAUDERDALE, FL 33309 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: P
Name: RUDDY, MICHAEL MD
Address: 1625 SE 3RD AVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: T
Name: TRANAKAS, NICHOLAS MD
Address: 6405 N FEDERAL HWY STE 401
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: S
Name: GUARNERI, RALPH MD
Address: 1508 SE 3RD AVE
City-St-Zip: FORT LAUDERDALE, FL 33316

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: MICHAEL RUDDY

P

01/06/2011

Electronic Signature of Signing Officer or Director

Date