

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002969

FILED
Feb 27, 2011
Secretary of State

Entity Name: INSTITUTE FOR THE ADVANCEMENT OF MEDICAL THERMOLOGY, INC.

Current Principal Place of Business:

315 DORIS DRIVE
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

12230 B IRON BRIDGE ROAD
CHESTER, VA 23831

New Mailing Address:

315 DORIS DRIVE
LAKELAND, FL 33813

FEI Number: 20-8689889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AIRTH, H. ADAM JR
500 SOUTH FLORIDA AVENUE STE 800
LAKELAND, FL 33801 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: PD
Name: PLOTKIN, MARTIN MD
Address: 2057 FOXFIELD RD., STE 102
City-St-Zip: ST CHARLES, IL 60174

Title: VPD
Name: MEAD, JAY H MD
Address: 619 MADISON ST #100
City-St-Zip: OREGON CITY, OR 97045

Title: TD
Name: CHANDLER, CAROL DOM
Address: 315 DORIS DR
City-St-Zip: LAKELAND, FL 33813

Title: SD
Name: DONATELLI, JUDY R.N.
Address: 3439 BABCOCK BLVD
City-St-Zip: PITTSBURG, PA 15237

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: CAROL CHANDLER

TD

02/27/2011

Electronic Signature of Signing Officer or Director

Date