

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 23, 2012
Secretary of State

Entity Name: FLORIDA FACIAL PLASTIC SURGERY EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

1 SOUTH SCHOOL AVE.
SUITE 800
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

1 SOUTH SCHOOL AVE.
SUITE 800
SARASOTA, FL 34237

New Mailing Address:

2400 ARDMORE BLVD.
SUITE 302
PITTSBURGH, PA 15221

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WACHHOLZ, MICHAEL S
3022 ST. JOHNS AVENUE
JACKSONVILLE, FL 32205 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: PRES
Name: AGARWAL, ANURAG MD
Address: 11181 HEALTH PARK BLVD, STE 1115
City-St-Zip: NAPLES, FL 34110

Title: IPP
Name: PRENDIVILLE, STEPHEN MD
Address: 9407 CYPRESS LAKE DRIVE, SUITE A
City-St-Zip: FT. MYERS, FL 33919

Title: TREA
Name: GROSS, EDWARD MD
Address: 1035 PRIMERA BLVD
City-St-Zip: LAKE MARY, FL 32746

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: STEPHEN PRENDIVILLE, MD

IPP

04/23/2012

Electronic Signature of Signing Officer or Director

Date