2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2011
Secretary of State

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Entity Name: THE FLORIDA INTERNATIONAL UNIVERSITY COLLEGE OF MEDICINE HEALTH CARE NETWORK FACULTY GROUP PRACTICE, INC.

Current Principal Place of Business:

11200 SW 8 STREET
PC 511
MIAMI, FL 33199 US

New Principal Place of Business:

Current Mailing Address:

11200 SW 8 STREET
PC 511
MIAMI, FL 33199 US

New Mailing Address:

FEI Number: 80-0151379 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MENDOZA, CRISTINA
11200 SW 8 STREET
PC 511
MIAMI, FL 33199 US

Name and Address of New Registered Agent:

RAATTAMA, KRISTINA
11200 SW 8 STREET
PC 511
MIAMI, FL 33199 US

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: KRISTINA RAATTAMA 03/08/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: C
Name: ROCK, JOHN A
Address: 11200 SW 8 STREET, AHC 2, 693
City-St-Zip: MIAMI, FL 33199 US

Title: VP
Name: HORSTMYER, JEFFREY L
Address: 1507 TUNIS STREET
City-St-Zip: CORAL GABLES, FL 33134

Title: T/S
Name: ZYNE, ALEXANDER G
Address: 5048 KEY LARGO DRIVE
City-St-Zip: PUNTA GORDA, FL 33950

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: KRISTINA RAATTAMA RA 03/08/2011
Electronic Signature of Signing Officer or Director Date