

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002407

FILED
Apr 21, 2011
Secretary of State

Entity Name: CONFERENCE OF FLORIDA MEDICAL SOCIETY EXECUTIVES, INC.

Current Principal Place of Business:

17503 MALLARD COURT
LUTZ, FL 33559

New Principal Place of Business:

Current Mailing Address:

17503 MALLARD COURT
LUTZ, FL 33559

New Mailing Address:

FEI Number: 26-3080794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COBBE, FRASER C
17503 MALLARD COURT
LUTZ, FL 33559 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: S
Name: DRAIN, LYNETTE
Address: 4153 CLARK ROAD
City-St-Zip: SARASOTA, FL 34233

Title: T
Name: STRICKLAND, HOLLY
Address: 8880 UNIVERSITY PARKWAY STE B
City-St-Zip: PENSACOLA, FL 32514

Title: PCH
Name: EADINGTON, MARGARET
Address: 1148 GOODLETTE ROAD NORTH
City-St-Zip: NAPLES, FL 34102

Title: VCH
Name: GATLIN, LIZ
Address: 4808 26TH STREET WEST
City-St-Zip: BRADENTON, FL 34207

Title: CH
Name: COBBE, FRASER
Address: 17503 MALLARD COURT
City-St-Zip: LUTZ, FL 33559

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: FRASER COBBE

CH

04/21/2011

Electronic Signature of Signing Officer or Director

Date