2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004441

FILED Jan 25, 2011 Secretary of State

Entity Name: FLORIDA HOMEOPATHIC SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

1806 GIPSON GREEN LANE WINTER PARK, FL 32789

Current Mailing Address: New Mailing Address:

1806 GIPSON GREEN LANE WINTER PARK, FL 32789

FEI Number: 27-1603641 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DENEEN, CHARLES S
8471 CARAWAY COURT
ORLANDO, FL 32819 US
DENEEN, CHARLES S
8470 CARAWAY COURT
ORLANDO, FL 32819 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: 01/25/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CHRD

 Name:
 PURCELL, KIMBERLY

 Address:
 18096 GIPSON GREEN LANE

 City-St-Zip:
 WINTER PARK, FL 32789

Title: D

Name: DENEEN, CHARLES S Address: 8470 CARAWAY COURT City-St-Zip: ORLANDO, FL 32819

Title:

Name: CRAWFORD, DEBRA W Address: 8470 CARAWAY COURT City-St-Zip: ORLANDO, FL 32819

Title: [

 Name:
 MILLET, POLLY

 Address:
 2540 SE 73 STREET

 City-St-Zip:
 OCALA, DL 34480

Title:

Name: MEAGHER, MARY ELLEN
Address: 1207 WHISPERING WINDS CT

City-St-Zip: APOPKA, FL 32703

Title: [

Name: HOAGLAND, JEAN

Address: 301 MCDONALD STREET UNIT 108 City-St-Zip: MOUNT DORA, FL 32757

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: CHARLES S DENEEN D 01/25/2011