

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000007709

FILED
Mar 01, 2012
Secretary of State

Entity Name: FLORIDA SUNSHINE CONSORTIUM, INC.

Current Principal Place of Business:

9779 NW 193RD ST
MICANOPY, FL 32667

New Principal Place of Business:

Current Mailing Address:

9779 NW 193RD ST
MICANOPY, FL 32667

New Mailing Address:

FEI Number: 45-2990688

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, STEPHEN W
1000 WEST MAIN ST
LEESBURG, FL 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: D
Name: LANE, MARY ROCKWOOD
Address: 11808 SW 61 ST
City-St-Zip: GAINESVILLE, FL 32608

Title: D
Name: MERKER, AGGIE
Address: MEMORIAL REGIONAL HOSPITAL 3501 JOHNSON ST
City-St-Zip: HOLLYWOOD, FL 33021

Title: D
Name: ROWE, JENNIFER
Address: BAPTIST MED CTR NASSAU 1250 S 18TH ST
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D
Name: JOHNSON, DIANE
Address: 9779 NW 193RD ST
City-St-Zip: MICANOPY, FL 32667

Title: D
Name: CORWIN, KIM
Address: NFSG VHS JX OUTPATIENT CLINIC-1833 BLVD ST
City-St-Zip: JACKSONVILLE, FL 32206

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: DIANE E JOHNSON

VP

03/01/2012

Electronic Signature of Signing Officer or Director

Date