## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11693

FILED Apr 06, 2010 Secretary of State

Entity Name: FLORIDA SOCIETY OF NEONATOLOGISTS, INC.

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

5534 BANNINGTON CT. 5534 BARRINGTON CT.

JACKSONVILLE, FL 32244 US JACKSONVILLE, FL 32244 US

Current Mailing Address: New Mailing Address:

5534 BANNINGTON CT. 5534 BARRINGTON CT.

JACKSONVILLE, FL 32244 US JACKSONVILLE, FL 32244 US

FEI Number: 59-2653813 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:

CAMACHO, JOANN
55434 BARINGTON COURT
JACKSONVILLE, FL 32244 US

CAMACHO, JOANN
5534 BARRINGTON COURT
JACKSONVILLE, FL 32244 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: 04/06/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: ED

Name: ROBERT, GARRISON MD Address: 653-1 WEST 8TH STREET City-St-Zip: JACKSONVILLE, FL 32209

Title: STD

 Name:
 STROMQUIST, CARINE MD

 Address:
 880 6TH STREET SOUTH, SUITE 470

 City-St-Zip:
 ST. PETERSBURG, FL 33701

Title: ED

 Name:
 CAMACHO, JOANN

 Address:
 5534 BARRINGTON COURT

 City-St-Zip:
 JACKSONVILLE, FL 32244

Title: DPE

Name: WILLIAM, DRISCOLL D DO

Address: 820 RUDENTIAL DRIVE, SUITE 210 City-St-Zip: JACKSONVILLE, FL 32207

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: JOANN CAMACHO ED 04/06/2010