

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22856

FILED
Mar 21, 2012
Secretary of State

Entity Name: FLORIDA SOCIETY OF ONCOLOGY SOCIAL WORKERS, INC.

Current Principal Place of Business:

4306 ALTON RD
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

2501 N. ORANGE AVE. SUITE 283
ORLANDO, FL 32804 US

Current Mailing Address:

P.O. BOX 837
HALLANDALE, FL 33008 US

New Mailing Address:

FEI Number: 59-2834503 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BERKOWITZ, SETH
2 OAKWOOD BLVD, SUITE 200
HOLLYWOOD, FL 33020 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: P
Name: MICELI, CHARLES
Address: 2501 N. ORANGE AVE. SUITE 283
City-St-Zip: ORLANDO, FL 32804 US

Title: S
Name: SKINNER, AMANDA
Address: 2100 GLENWOOD DRIVE
City-St-Zip: WINTER HAVEN, FL 32792 US

Title: T
Name: BERKOWITZ, SETH
Address: 2 OAKWOOD BLVD, SUITE 200
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: D
Name: DAVIS, NILI
Address: 2845 AVENTURA BLVD #243
City-St-Zip: AVENTURA, FL 33140 US

Title: D
Name: SULLIVAN, ROSEMARY I
Address: 4306 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33140 US

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: SETH BERKOWITZ

T

03/21/2012

Electronic Signature of Signing Officer or Director

Date