2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2010
Secretary of State

DOCUMENT# N38614

Entity Name: FLORIDA SOCIETY OF ADDICTION MEDICINE, INC.

Current Principal Place of Business:

301 W. PLATT ST.
#335
TAMPA, FL 33606 US

New Principal Place of Business:

Current Mailing Address:

301 W. PLATT ST.
#335
TAMPA, FL 33606 US

New Mailing Address:

FEI Number: 59-2992737 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARDEN, JOHN R MR.
301 W. PLATT ST.
#335
TAMPA, FL 33606 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: PRES
Name: TEITELBAUM, SCOTT MD
Address: 12504 NW 116TH PL
City-St-Zip: ALACHUA, FL 32615 US

Title: TRSR
Name: STROLLA, MICHAEL D.O.
Address: 825 WEST LINEBAUGH AVE
City-St-Zip: TAMPA, FL 33612 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: MICHAEL P. STROLLA, DO TRSR 04/01/2010

Electronic Signature of Signing Officer or Director Date