

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005730

FILED
Feb 16, 2011
Secretary of State

Entity Name: THE NOVA SOUTHEASTERN UNIVERSITY HEALTH PROFESSIONS DIVISION FOUNDATION, INC.

Current Principal Place of Business:

3200 S. UNIVERISTY DRIVE
FT. LAUDERDALE, FL 33328 US

New Principal Place of Business:

Current Mailing Address:

3200 S. UNIVERISTY DRIVE
FT. LAUDERDALE, FL 33328 US

New Mailing Address:

FEI Number: 65-0456144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIPPMAN, FRED
3200 SOUTH UNIVERSITY DRIVE
FORT LAUDERDALE, FL 33328 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: C
Name: JONAS, ROYAL F ESQ
Address: 8843 ABBOTT AVENUE
City-St-Zip: SURFSIDE, FL 33154

Title: AED
Name: NEER, HOWARD
Address: 3200 SOUTH UNIVERSITY DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: ED
Name: LIPPMAN, FRED
Address: 3200 SOUTH UNIVERSITY DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: T
Name: TISCHENKEL, JAY
Address: 3200 SOUTH UNIVERSITY DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33328

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: FRED LIPPMAN

ED

02/16/2011

Electronic Signature of Signing Officer or Director

Date