

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001517

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: CAPITAL MEDICAL SOCIETY ALLIANCE, INC.

## Current Principal Place of Business:

1204 MICCOUSUKEE ROAD  
TALLAHASSEE, FL 32308

## New Principal Place of Business:

## Current Mailing Address:

1204 MICCOUSUKEE ROAD  
TALLAHASSEE, FL 32308

## New Mailing Address:

FEI Number: 59-3387057

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WENDLAND, KAREN  
1204 MICCOSUKEE RD.  
TALLAHASSEE, FL 32308 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: DV ( ) Delete  
Name: PLACILLA, DEBRA  
Address: 1237 STONEHURST WAY  
City-St-Zip: TALLAHASSEE, FL 32312

Title: T (X) Delete  
Name: MEGAN, SEAN  
Address: 2466 LARUELWOOD CT  
City-St-Zip: TALLAHASSEE, FL 32308

Title: S ( ) Delete  
Name: RUMARA, MARA  
Address: 2894 N HANNON HILL DR  
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD ( ) Delete  
Name: SANTOLI, MAURA  
Address: 2049 CHATSWORTH WAY  
City-St-Zip: TALLAHASSEE, FL 32309

Title: SD ( ) Delete  
Name: SMITH, KATHLEEN  
Address: 3340 CHARLESTON RD  
City-St-Zip: TALLAHASSEE, FL 32309

Title: VP ( ) Delete  
Name: MORALES, TRACY  
Address: 2657 EGRET CRT  
City-St-Zip: TALLAHASSEE, FL 32308

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SMITH, KATHLEEN PRES  
Address: 3340 CHARLESTON ROAD  
City-St-Zip: TALLAHASSEE, FL 32309

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: RUMANA, MARA SECRETARY  
Address: 2894 N HANNON HILL DR  
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD (X) Change ( ) Addition  
Name: SANTOLI, MAURA TREAS.  
Address: 2049 CHATSWORTH WAY  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D (X) Change ( ) Addition  
Name: MURRAH, ALISON  
Address: 2321 ELLICOT DR  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP (X) Change ( ) Addition  
Name: SGAN, MEGAN  
Address: 2466 LAURELWOOD COURT  
City-St-Zip: TALLAHASSEE, FL 32308

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KATHLEEN SMITH

PRES

04/16/2007

Electronic Signature of Signing Officer or Director

Date