

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002803

FILED
Apr 07, 2008
Secretary of State

Entity Name: SOUTH FLORIDA PROVIDER COALITION, INCORPORATED

Current Principal Place of Business:

2140 SOUTH DIXIE HIGHWAY
SUITE 205
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

2140 SOUTH DIXIE HIGHWAY
SUITE 205
MIAMI, FL 33133 US

New Mailing Address:

FEI Number: 59-3380599 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DOW, JOHN W E.D.
2140 SOUTH DIXIE HIGHWAY
SUITE 205
MIAMI, FL 33133 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: D () Delete
Name: JACKSON, VALERA
Address: 3180 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: SAFRON, STEVE
Address: 15100 NW 27TH AVE
City-St-Zip: MIAMI, FL 33054

Title: D () Delete
Name: HAYDEN, BRUCE
Address: 18441 NW 2ND AVE, 218
City-St-Zip: MIAMI, FL 33169

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JACKSON, VALERA
Address: 4500 ISLAND ROAD
City-St-Zip: MIAMI, FL 33137

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

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

Title: D () Change (X) Addition
Name: BREGMAN, ARTHUR
Address: 1320 SOUTH DIXIE HIGHWAY, STE. 1140
City-St-Zip: MIAMI, FL 33146

Title: D () Change (X) Addition
Name: ZOHLMAN, BARBARA
Address: 16201 SW 95 AVENUE, STE. 205
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information supplied with this filing does not qualify 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: H. BRUCE HAYDEN

D

04/07/2008

Electronic Signature of Signing Officer or Director

Date