

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000983

FILED
Jun 11, 2009
Secretary of State

Entity Name: NORTH FLORIDA FOUNDATION FOR RESEARCH AND EDUCATION, INC.

Current Principal Place of Business:

MALCOM RANDALL VAME
1601 SW ARCHER RD (151)
GAINESVILLE, FL 326081197 US

New Principal Place of Business:

MALCOM RANDALL VAMC
1601 SW ARCHER RD (151)
GAINESVILLE, FL 326081197 US

Current Mailing Address:

MALCOM RANDALL VAME
1601 SW ARCHER RD (151)
GAINESVILLE, FL 326081197 US

New Mailing Address:

MALCOM RANDALL VAMC
1601 SW ARCHER RD (151)
GAINESVILLE, FL 326081197 US

FEI Number: 59-3432918 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DOWLING, RUTH
10000 BAY PINES BLVD
BAY PINES, FL 33744 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: M () Delete
Name: MITCHELL, JOY
Address: 1601 SW ARCHER RD (151)
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: KITCHEN, CRAIG S MD
Address: 1601 SW ARCHER RD. (11A)
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: BENDER, BRADLEY S
Address: 1601 SW ARCHER RD (11)
City-St-Zip: GAINESVILLE, FL 326081197

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MGR (X) Change () Addition
Name: MITCHELL, JOY
Address: 1601 SW ARCHER RD (151)
City-St-Zip: GAINESVILLE, FL 326081135 US

Title: D (X) Change () Addition
Name: CHEONG, JOSEPHA MD
Address: 1601 SW ARCHER RD. (11A)
City-St-Zip: GAINESVILLE, FL 326081135 US

Title: ST (X) Change () Addition
Name: BENDER, BRADLEY S MD
Address: 1601 SW ARCHER RD (11)
City-St-Zip: GAINESVILLE, FL 326081135 US

Title: D () Change (X) Addition
Name: HOFFMAN, PAUL MD
Address: 1601 SW ARCHER RD (151)
City-St-Zip: GAINESVILLE, FL 326081135 US

Title: P () Change (X) Addition
Name: CAPPELLO, THOMAS A MPH
Address: 1601 SW ARCHER RD
City-St-Zip: GAINESVILLE, FL 326081135 US

Title: D () Change (X) Addition
Name: SCHILLING, PAUL MD
Address: 1601 SW ARCHER RD
City-St-Zip: GAINESVILLE, FL 326081135 US

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: JOY MITCHELL

M

06/11/2009

Electronic Signature of Signing Officer or Director

Date