

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003955

FILED
Feb 27, 2009
Secretary of State

Entity Name: FIRST COAST ENDOCRINOLOGY FOUNDATION, INC.

Current Principal Place of Business:

9506 SOUTH RED ROAD
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

9506 SOUTH RED ROAD
MIAMI, FL 33156

New Mailing Address:

FEI Number: 65-0672719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OESTERLE, DOUGLAS
9506 SOUTH RED ROAD
MIAMI, FL 33156 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: PD () Delete
Name: OESTERLE, ROBERT A MD
Address: 9506 SOUTH RED ROAD
City-St-Zip: MIAMI, FL 33156

Title: MGR () Delete
Name: OESTERLE, DOUGLAS W
Address: 9506 SOUTH RED ROAD
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ROBERT A OESTERLE

PD

02/27/2009

Electronic Signature of Signing Officer or Director

_____ Date