

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001653

FILED
Apr 09, 2010
Secretary of State

Entity Name: CENTRAL FLORIDA MEDICAL SOCIETY INC.

Current Principal Place of Business:

1583 E SILVER STAR RD
#328
OCOE, FL 347612562

New Principal Place of Business:

Current Mailing Address:

1583 E SILVER STAR RD
#328
OCOE, FL 347612562

New Mailing Address:

FEI Number: 59-3300325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LIZAMA, ANNA MD
3740 S. LAKE ORLANDO AVE
ORLANDO, FL 32808 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: DTS
Name: HOWELL, MICHAEL MD
Address: 977 CHAUNCEY CT
City-St-Zip: OCOEE, FL 34761

Title: DP
Name: LIZAMA, ANNA MD
Address: 3740 S. LAKE ORLANDO AVE
City-St-Zip: ORLANDO, FL 32808

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: MICHAEL HOWELL MD

DTS

04/09/2010

Electronic Signature of Signing Officer or Director

Date