

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000122728

FILED
Jan 30, 2009
Secretary of State

Entity Name: FLORIDA INSTITUTE OF HOSPITALISTS INC.

Current Principal Place of Business:

5228 LEITNER DRIVE WEST
CORAL SPRINGS, FL 33067

New Principal Place of Business:

6500 COYLE AVE
5
CARMICHAEL, CA 95608

Current Mailing Address:

6500 COYLE AVE
5
CARMICHAEL, CA 95608

New Mailing Address:

FEI Number: 20-5490311 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULTAN, SULTAN A
5228 LEITNER DR WEST
CORAL SPRINGS, FL 33067 US

Name and Address of New Registered Agent:

CARLSON, JUDITH C
1812 NW 36TH COURT
OAKLAND PARK, FL 33309 US

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: JUDITH C CARLSON

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SULTAN, SULTAN A
Address: 5228 LEITNER DRIVE WEST
City-St-Zip: CORAL SPRINGS, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SULTAN, SULTAN A
Address: 6500 COYLE AVE STE 5
City-St-Zip: CARMICHAEL, CA 95608

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SULTAN A SULTAN

PRES

01/30/2009

Electronic Signature of Signing Officer or Director

Date