2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2020
Secretary of State
0742300669CC

DOCUMENT# 708836

Entity Name: ATTENDING STAFF FOUNDATION, INC.

Current Principal Place of Business:

580 W. 8TH ST
SUITE 501
JACKSONVILLE, FL 32209

Current Mailing Address:

580 W. 8TH ST
SUITE 501
JACKSONVILLE, FL 32209 US

FEI Number: 59-6169725

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PETERS, MD, THOMAS G
580 W. 8TH ST
SUITE 501
JACKSONVILLE, FL 32209 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRES
Name	GODWIN, STEVEN A DR.
Address	580 W. 8TH ST SUITE 501
City-State-Zip:	JACKSONVILLE FL 32209

Title	VP
Name	NORSE, ASHLEY B DR.
Address	580 W. 8TH ST SUITE 501
City-State-Zip:	JACKSONVILLE FL 32209

Title	TREA
Name	SIRAGUSA, DANIEL DR.
Address	655 W 8TH ST, BOX C90
City-State-Zip:	JACKSONVILLE FL 32209

Title	EXEC
Name	PETERS, THOMAS G DR.
Address	580 WEST 8TH STREET, SUITE 501
City-State-Zip:	JACKSONVILLE FL 32209

Title	DIRECTOR
Name	COSTA, JOSEPH A DR.
Address	580 W 8TH STREET SUITE 501
City-State-Zip:	JACKSONVILLE FL 32209

Title	DIR
Name	BEST, KELLY A DR.
Address	580 W. 8TH ST SUITE 501
City-State-Zip:	JACKSONVILLE FL 32209

Title	DIRECTOR
Name	ZENNI, ELISA A DR.
Address	580 W. 8TH ST SUITE 501
City-State-Zip:	JACKSONVILLE FL 32209

Title	PAST PRESIDENT
Name	FOSTER, MALCOLM T
Address	580 W. 8TH ST SUITE 501
City-State-Zip:	JACKSONVILLE FL 32209

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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: THOMAS G. PETERS, MD EXECUTIVE DIRECTOR 02/20/2020

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	EBLER, DAVID J DR.
Address	580 W 8TH STREET SUITE 501
City-State-Zip:	JACKSONVILLE FL 32209