

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 714103

**Entity Name:** ORANGE COUNTY MEDICAL SOCIETY OF FLORIDA,  
INCORPORATED**FILED**  
**Jan 24, 2023**  
**Secretary of State**  
**0595960343CC****Current Principal Place of Business:**522 S. HUNT CLUB BLVD  
#412  
APOPKA, FL 32703**Current Mailing Address:**522 S. HUNT CLUB BLVD  
#412  
APOPKA, FL 32703 US**FEI Number: 59-0746887****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**COBBE, FRASER  
522 S. HUNT CLUB BLVD  
#412  
APOPKA, FL 32703 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: FRASER COBBE****01/24/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** EXECUTIVE DIRECTOR  
**Name** COBBE, FRASER  
**Address** 522 S. HUNT CLUB BLVD  
#412  
**City-State-Zip:** APOPKA FL 32703**Title** PAST PRESIDENT  
**Name** JEAN, SAMUEL  
**Address** 522 S. HUNT CLUB BLVD  
#412  
**City-State-Zip:** APOPKA FL 32703**Title** PRESIDENT-ELECT  
**Name** ADEMOLA, ADEWALE  
**Address** 522 S. HUNT CLUB BLVD  
#412  
**City-State-Zip:** APOPKA FL 32703**Title** PRESIDENT  
**Name** SEELA, SRINIVAS  
**Address** 522 S. HUNT CLUB BLVD  
#412  
**City-State-Zip:** APOPKA FL 32703**Title** TREASURER  
**Name** KAPLAN, BENJAMIN  
**Address** 522 S. HUNT CLUB BLVD  
#412  
**City-State-Zip:** APOPKA FL 32703**Title** VP  
**Name** PATTANI, SANJAY  
**Address** 522 S. HUNT CLUB BLVD  
#412  
**City-State-Zip:** APOPKA FL 32703**Title** SECRETARY  
**Name** AUFFANT, JESSICA  
**Address** 522 S. HUNT CLUB BLVD  
#412  
**City-State-Zip:** APOPKA FL 32703

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: FRASER COBBE****EXECUTIVE DIRECTOR****01/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date