

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751168

Entity Name: SOUTH FLORIDA CHAPTER OF THE AMERICAN COLLEGE OF SURGEONS, INC.

Current Principal Place of Business:

537-B BURLINGTON ST
OPA LOCKA, FL 33054

Current Mailing Address:

537-B BURLINGTON ST
OPA LOCKA, FL 33054 US

FEI Number: 65-0341957

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOUCK, WILLIAM
537-B BURLINGTON STREET
OPA LOCKA, FL 33054 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 P
Name PARAMO, JUAN C. MD
Address MOUNT SINAI MEDICAL CENTER
4300 ALTON ROAD
City-State-Zip: MIAMI BEACH FL 33140

Title D
Name BOUCK, WILLIAM
Address 537 B BURLINGTON STREET
City-State-Zip: OPA-LOCKA FL 33054

Title ST
Name ROSENTHAL, RAUL MD
Address CLEVELAND CLINIC FLORIDA
2950 CLEVELAND CLINIC BLVD.
City-State-Zip: WESTON FL 33331

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: WILLIAM BOUCK

DIRECTOR

02/07/2014

Electronic Signature of Signing Officer/Director Detail

Date