

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003206

Entity Name: LOWER NEW YORK CHAPTER OF THE AMERICAN
ASSOCIATION OF CLINICAL ENDOCRINOLOGISTS, INC.

Current Principal Place of Business:

245 RIVERSIDE AVE STE 200
JACKSONVILLE, FL 32202-4933

Current Mailing Address:

245 RIVERSIDE AVE STE 200
JACKSONVILLE, FL 32202-4933 US

FEI Number: 01-0735703

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES, DONALD C
245 RIVERSIDE AVE STE 200
JACKSONVILLE, FL 32202-4933 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 TRAGER, GARY AMD
Address 475 NEW YORK AVENUE
City-State-Zip: HUNTINGTON NY 11743

Title VP
Name GRAJOWER, MARTIN MD
Address 3736 HENRY HUDSON PKWY
City-State-Zip: RIVERDALE NY 10463

Title CEO
Name JONES, DONALD C
Address 245 RIVERSIDE AVE STE 200
City-State-Zip: JACKSONVILLE FL 32202-4933

Title SECRETARY, TREASURER
Name TIBALDI, JOSEPH MD
Address 161 ROCKWOOD RD
City-State-Zip: MANHASSET NY 11030

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: DONALD C JONES

CEO

04/01/2015

Electronic Signature of Signing Officer/Director Detail

Date